

OUTPATIENT PHARMACY

MANAGER'S USER MANUAL

Version 7.0 December 1997

(Revised November 2010)

Department of Veterans Affairs
 Office of Enterprise Development

Revision History

Each time this manual is updated, the Title Page lists the new revised date and this page describes the changes. If the Revised Pages column lists "All," replace the existing manual with the reissued manual. If the Revised Pages column lists individual entries (e.g., 25, 32), either update the existing manual with the Change Pages Document or print the entire new manual.

Date	Revised Pages	Patch Number	Description
11/10	All	PSO*7*358	Added information regarding TRICARE Active Duty Bypass/Override details (S. Spence, PM; G. Johnson, Tech Writer)

(This page included for two-sided copying.)

Preface

This user manual describes the functional characteristics of Outpatient Pharmacy V. 7.0. It is intended for pharmacists and technicians who are familiar with the functioning of Outpatient Pharmacy in a Veterans Affairs Medical Center (VAMC).

(This page included for two-sided copying.)

Table of Contents

Preface	iii
Table of Contents	V
Chapter 1: Introduction	1
Documentation Conventions	2
Chapter 2: List Manager	5
Using List Manager with Outpatient Pharmacy Entering Actions Outpatient Pharmacy Hidden Actions Speed Actions Other Outpatient Pharmacy ListMan Actions Other Screen Actions	
Chapter 3: Using the <i>Outpatient Pharmacy Manager</i> Mer	
Patient Lookup	
-	
Chapter 4: Using the Archive Menu Option	
Archiving Find Save to Tape Tape Retrieval Archive to File File Retrieval Purge *Temporarily Out of Order* List One Patient's Archived Rx's Print Archived Prescriptions	
Chapter 5: Autocanceling	21
Autocancel Rx's on Admission	21
Chapter 6: Using the Bingo Board Menu	23
Bingo Board Bingo Board Manager (BM) Enter/Edit Display Auto-Start Enter/Edit Print Bingo Board Statistics. Print Bingo Board Wait Time Purge Bingo Board Data Start Bingo Board Display	
Stop Bingo Board Display Bingo Board User (BU)	
Enter New Patient Display Patient's Name on Monitor	
Remove Patient's Name from Monitor	31

Status of Patient's Order	31
Chapter 7: Changing the Label Printer	33
Change Label Printer	
Chapter 8: Controlling the Dispensing of Clozapine	35
Clozapine Pharmacy Manager	
Display Lab Tests and Results	36
Edit Data for a Patient in the Clozapine Program	
List of Override Prescriptions	
Register Clozapine Patient	
Messages for Clozapine Drug Selection	
Chapter 9: Handling Copay Charges	41
Copay Menu	
CHAMPUS Billing Exemption	
Exempt Rx Patient Status from Copayment	
Reset Copay Status/Cancel Charges	
Reset Copay Status	
Enter/Edit Medication Exemption Question Responses	
Potential Charges and Partial Charges	
IB-initiated Medication Copay Charge	
Chapter 10: Evaluating Drug Usage	
DUE Supervisor	
Enter a New Answer Sheet	
Edit an Existing Answer Sheet	
Create/Edit a Questionnaire	
Batch Print Questionnaires	52
DUE Report	52
Chapter 11: Enter/Edit Clinic Sort Groups	53
Enter/Edit Clinic Sort Groups	53
Chapter 12: External Interface Menu	55
External Interface Menu	55
Purge External Batches	
Reprint External Batches	
View External Batches	57
Chapter 13: Label/Profile Monitor Reprint	59
Label Profile Monitor Reprint	59
Chapter 14: Implementing and Maintaining Outpatient Pharmacy	59
Maintenance (Outpatient Pharmacy)	59
Site Parameter Enter/Edit	
Edit Provider	
Add New Providers	
Queue Background Jobs	68

Autocancel Rx's on Admission	69
Bingo Board Manager (BM)	69
Enter/Edit Display	
Auto-Start Enter/Edit	
Print Bingo Board Statistics	
Print Bingo Board Wait Time	
Purge Bingo Board Data	
Start Bingo Board Display	
Stop Bingo Board Display	
Edit Data for a Patient in the Clozapine Program	
Enter/Edit Clinic Sort Groups	
Initialize Rx Cost Statistics	
Edit Pharmacy Intervention	
Delete Intervention	
Auto-delete from Suspense	
Automate Internet Refill	
Delete a Prescription	
Expire Prescriptions	
Manual Auto Expire Rxs	
Prescription Cost Update	
Purge Drug Cost Data	
Purge External Batches.	
Recompile AMIS Data	
Recompile Aiviis Data	
Chapter 15: Using the Medication Profile	82
Medication Profile	82
Medication Profile: Short Format	
Medication Profile: Long Format	
Medication Reconciliation	
Chapter 16: About the Output Reports Menu	86
Output Reports	86
Action Profile (132 COLUMN PRINTOUT)	
Alpha Drug List and Synonyms	
AMIS Report	
Bad Address Reporting Main Menu	
Bad Address Suspended List	
List Prescriptions Not Mailed	
CMOP Controlled Substance Rx Dispense Report	
Commonly Dispensed Drugs	
Cost Analysis Reports	
Clinic Costs	
Division Costs by Drug	
Drug Costs	
Drug Costs by Division	
Drug Costs by Division Drug Costs by Division by Provider	
Drug Costs by Provider	
High Cost Rx Report	
Patient Status Costs	
Pharmacy Cost Statistics Menu	
Pharmacy Statistics	94

Sort Statistics By Division	
Provider by Drug Costs	94
Provider Costs	
Request Statistics	
Daily AMIS Report	
Drug List By Synonym	
Free Text Dosage Report	
Inactive Drug List	
Internet Refill Report	
List of Patients/Prescriptions for Recall Notice	
List Prescriptions on Hold	
Management Reports Menu	
15.1.1	
Daily Management Report Menu	
All Reports	
Cost of Prescriptions	
Count of Prescriptions	
Intravenous Admixture	
Type of Prescriptions Filled	
Date Range Recompile DataInitialize Daily Compile	
Monthly Management Report Menu	
All Reports	
Cost of Prescriptions	
Count of Prescriptions	
Intravenous Admixture	
Type of Prescriptions Filled	
One Day Recompile Data	
Purge Data	
Medication Profile	
Monthly Drug Cost	
Narcotic Prescription List	
Non-Formulary List	
Non-VA Meds Usage Report	
Poly Pharmacy Report	
Released and Unreleased Prescription Report	117
Prescription List for Drug Warnings	
Chapter 17: Using the Pharmacy Intervention Menu	119
Pharmacy Intervention Menu	
Enter Pharmacy Intervention	
Edit Pharmacy Intervention	
Print Pharmacy Intervention	
Delete Intervention	
View Intervention	
Chapter 18: Processing Drug/Drug Interactions	121
Process Drug/Drug Interactions	121
Chapter 19: Releasing Medication	123
Release Medication	123

Changes to Releasing Orders function - Digitally Signed Orders Only	126
Changes to Releasing Orders Function - ScripTalk®	126
Changes to Releasing Orders Function – HIPAA NCPDP Global	127
Chapter 20: Returning Medication to Stock	129
Return Medication to Stock	129
Chapter 21: Processing a Prescription	131
Rx (Prescriptions)	131
Patient Prescription Processing	132
Entering a New Order	
Entering a new order with Local or Free-Text Dosage	143
Entering a new orderePharmacy (third party billable)	147
Displaying a Patient's Remote Prescriptions	
Editing an Order	
Editing an ePharmacy Order	
DAW/NDC Edit	160
Using the Copy Action	
Copying an ePharmacy Order	
Renewing a Prescription	
Renewing an ePharmacy Order	
Flagging and Unflagging a New Pending Order	
Barcode Rx Menu	
Barcode Batch Prescription Entry	
Check Quality of Barcode	
Process Internet Refills	
Complete Orders from OERR	
Flagging and Unflagging a New Pending Order	
Changes to Finishing Pending Orders Process - Digitally Signed Orders Only	
Finishing an Order from OERR with Multiple Institutions	
Finishing an ePharmacy Order	
Activity Log	
Discontinue Prescription(s)	
Edit Prescriptions.	
ePharmacy Menu	
Ignored Rejects Report	
ePharmacy Medication Profile (View Only)	
NDC Validation	
ePharmacy Medication Profile Division Preferences	
ePharmacy Site Parameters	
Third Party Payer Rejects - View/Process	
Third Party Payer Rejects - Worklist	
TRICARE Bypass/Override Report	
Tricare Reject Processing	
TRICARE Eligible Outpatient Override Function	
Other Rejects	
MailMan Message for Open/Unresolved Rejects	
Alerts for Discontinued CMOP Prescription	
Discontinued by a Background Process	
Discontinued by a Foreground Pharmacy Process	
List One Patient's Archived Rx's	
LIDE OHO I WICHED / HOHE FOR IVA D	

Manual Print of Multi-Rx Forms	247
Reprint an Outpatient Rx Label	248
Signature Log Reprint	249
View Prescriptions	
Chapter 22: ScripTalk® 'Talking' Prescription Labels	251
ScripTalk Main Menu	251
ScripTalk Patient Enter/Edit	
Queue ScripTalk Label by Barcode	
Queue ScripTalk Label by Rx#	
ScripTalk Reports	
ScripTalk Audit History Report	
Report of ScripTalk Enrollees	
Reprint a non-voided Outpatient Rx Label	
Set Up and Test ScripTalk Device	
ScripTalk Device Definition Enter/Edit	
Print Sample ScripTalk Label	
Test ScripTalk Device	
Reinitialize ScripTalk Printer	
·	
Chapter 23: Using the Supervisor Functions Menu	
Supervisor Functions	
Add New Providers	
Daily Rx Cost	
Delete a Prescription	
Edit Provider	
Initialize Rx Cost Statistics	
Inter-Divisional Processing	
Inventory	
Look-up Clerk by Code	
Monthly Rx Cost Compilation	
Patient Address Changes Report	
Pharmacist Enter/Edit	
Purge Drug Cost Data	264
Recompile AMIS Data	
Site Parameter Enter/Edit	265
View Provider	271
Chapter 24: Using the Suspense Functions	273
Suspense Functions	273
Auto-delete from Suspense	273
Change Suspense Date	274
Count of Suspended Rx's by Day	274
Delete Printed Rx's from Suspense	275
Log of Suspended Rx's by Day (this Division)	275
Print from Suspense File	275
³ / ₄ Days Supply Hold	
Host Errors	
TRICARE	277
Pull Early from Suspense	278
Queue CMOP Prescription	278

Reprint Batches from Suspense	279
Chapter 25: Updating a Patient's Record	281
Update Patient Record	281
Chapter 26: Verifying Prescriptions	285
Verification	285
List Non-Verified Scripts	
Non-Verified Counts	287
Rx Verification by Clerk	
Verification through Patient Prescription Processing	
Verifying ePharmacy Orders	
Glossary	293
Index	299

(This page included for two-sided copying.)

Chapter 1: Introduction

The Outpatient Pharmacy V. 7.0 package:

- Provides a method for managing the medications given to veterans who have visited a clinic or who have received prescriptions upon discharge from the hospital.
- Automatically generates prescription labels, and prints refill request forms.
- Medication histories are kept online to permit checks for potential interactions.
- Profiles can be generated to assist the clinician in managing the patient's medication regimen.
- Management reports aid the pharmacy in controlling inventory and costs.

The primary benefits to the veteran are the assurance that he or she is receiving the proper medication and the convenience of obtaining refills easily. The clinicians and pharmacists responsible for patient care benefit from a complete, accurate, and current medication profile available at any time to permit professional evaluation of treatment plans. Utilization, cost, and workload reports provide management cost controlling tools while maintaining the highest level of patient care.

A number of site parameters allow the individual Department of Veterans Affairs Medical Center (VAMC) to customize the package to meet local needs.

Documentation Conventions

This *Outpatient Pharmacy V. 7.0 Manager's User Manual* includes documentation conventions, also known as notations, which are used consistently throughout this manual. Each convention is outlined below.

Convention	Example			
Menu option text is italicized.	There are eight options on the <i>Archiving</i> menu.			
Screen prompts are denoted with quotation marks around them.	The "Dosage:" prompt displays next.			
Responses in bold face indicate user input.	Select Orders by number: (1-6): 5			
<enter></enter> indicates that the Enter key (or Return key on some keyboards) must be pressed.	Type Y for Yes or N for No and press <enter></enter> .			
< Tab> indicates that the Tab key must be pressed.	Press <tab></tab> to move the cursor to the next field.			
Indicates especially important or helpful information.	Up to four of the last LAB results can be displayed in the message.			
Indicates that options are locked with a particular security key. The user must hold the particular security key to be able to perform the menu option.	This option requires the security key PSOLOCKCLOZ.			

Getting Help

?, ??? One, two or three question marks can be entered at any of the prompts for online help. One question mark elicits a brief statement of what information is appropriate for the prompt. Two question marks provide more help, plus the hidden actions, and three question marks will provide more detailed help, including a list of possible answers, if appropriate.

Related Manuals

The following manuals are located on the VistA Documentation Library (VDL) at: http://www.va.gov/vdl.

Main Package Documentation:

- Outpatient Pharmacy V. 7.0 Release Notes
- Outpatient Pharmacy V. 7.0 Manager's User Manual
- Outpatient Pharmacy V. 7.0 Pharmacist's User Manual
- Outpatient Pharmacy V. 7.0 Technician's User Manual
- Outpatient Pharmacy V. 7.0 User Manual Supplemental
- Outpatient Pharmacy V. 7.0 Technical Manual/Security Guide

Additional Documentation:

Additional documentation related to specific projects is also located on the VDL. For example, there may be several different Release Notes documents, which apply to specific projects. Also, there may be

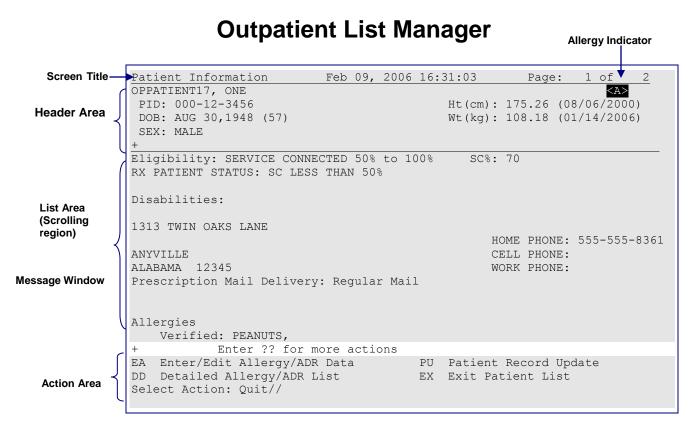
several sets of "Change Page" documents, which apply to changes made only for a specific package patch.

Chapter 2: List Manager

The screen displayed when processing an order has changed dramatically from the previous version of Outpatient Pharmacy (e.g., v. 6.0). The new screen was designed using List Manager.

This new screen gives more information and easier accessibility to vital reports and areas of a patient's chart.

Please take the time to read over the explanation of the screen and the actions that can now be executed at the touch of a key. This type of preparation before attempting to use List Manager will reduce the time and effort needed to become skilled in order processing with this new version of List Manager.



Screen title: The screen title changes according to what type of information List Manager is

displaying (e.g., Patient Information, Medication Profile, New OP Order

(ROUTINE), etc.).

Allergy indicator: This indicator displays when there has been information entered into the ALLERGY

field for the patient. The indicator displays "NO ALLERGY ASSESSMENT" if there

is no allergy assessment for the patient.

Header area: The header area is a "fixed" (non-scrollable) area that displays patient information.

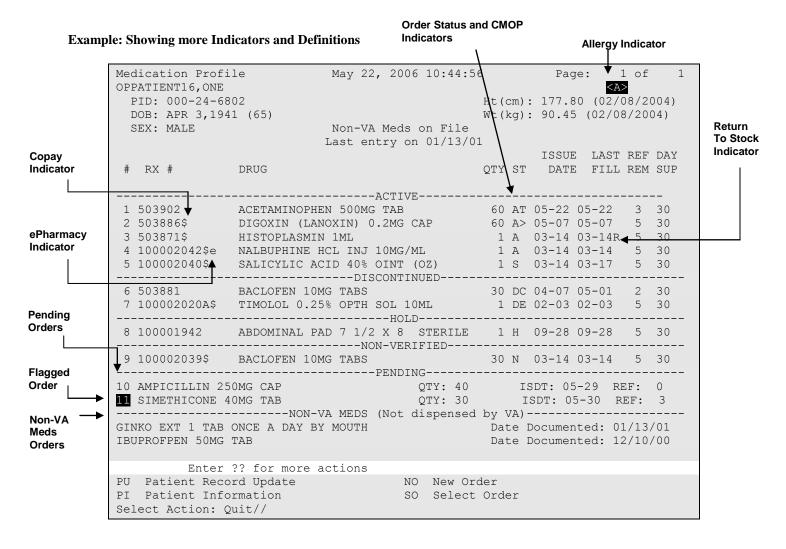
List area: (scrolling region) This area scrolls (like the previous version) and displays the

information on which action can be taken.

Message window: This section displays a plus (+) sign, minus (-) sign, or informational text (i.e., Enter ?? for more actions). If a plus sign is entered at the action prompt, List Manager will "jump" forward a page. If a minus sign is displayed and entered at the action prompt, List Manager will "jump" back a screen. The plus and minus signs are only valid actions if they are displayed in the message window.

Action area:

A list of actions display in this area of the screen. If a double question mark (??) is entered at the "Select Item(s)" prompt, a "hidden" list of additional actions that are available will be displayed. Outpatient Pharmacy hidden actions are displayed with the letters (OP) next to the action.



All orders are sub-grouped by like statuses and then listed alphabetically within the sub-group.

Order Status: The current status of the order. These statuses include:

A Active S Suspended

N Non-Verified or Drug Interactions

H Hold or Provider Hold

E Expired

DC Discontinued or Discontinued by Provider

DE Discontinued (Edit)



A "B" will be appended to the above statuses if the Bad Address Indicator was set and there was no active temporary address at the time of the last label activity.

CMOP Indicators: There are two separate indicators when the drug in an order is marked for

Consolidated Mail Outpatient Pharmacy (CMOP) processing. This indicator is

displayed after the Order Status if applicable.

> Drug for the prescription is marked for CMOP

T Displayed when the last fill is either in a Transmitted or Retransmitted

CMOP state. (This indicator can overwrite the ">" indicator.

Copay Indicator: A "\$" displayed to the right of the prescription number indicates the prescription

is copay eligible.

ePharmacy An 'e' displayed to the right of the prescription number indicates that

Indicator the prescription is electronic third-party billable.

Return to Stock An "R" displayed to the right of the Last Fill Date indicates the last fill was returned to stock.

Pending Orders: Any orders entered through Computerized Patient Records System (CPRS), or another outside source, that have not been finished by Outpatient Pharmacy.

another outside source, that have not been missied by outpatient I harmacy.

Non-VA Meds Any over the counter (OTC) medications, herbal supplements, medications prescribed by providers outside the VA, and medications prescribed by the VA,

but purchased by the patient at an outside pharmacy are displayed here. Non-VA Meds orders cannot be placed or updated in Outpatient Pharmacy. The user can input information about a patient's use of Non-VA Meds only through CPRS. However, the user can use either CPRS or Outpatient Pharmacy menu options to

view Non-VA Meds data in a patient's medical records.

Third Party Rejects

Any prescriptions that are rejected by third-party payers because of Refill Too Soon (code 79) or Drug Utilization Review (DUR - code 88) are displayed in this section.

Example: Showing Rejected Prescriptions

Medication Profile	August 12, 2	006@12:35:	04				
OPPATIENT16,ONE					<a< td=""><td>></td><td></td></a<>	>	
PID: 000-24-6802			Ht(cm):				′
DOB: APR 3,1941 (65)			Wt(kg):	90.45	(02/0	8/20	05)
SEX: MALE							
			ISSUE				
# RX # DRUG			QTY ST	DATE	FILL	REM	SUP
	00 0001/0110 001	DOMO (MI- i	-1 D				
REFILL T							
1 51368009\$e DIGOXIN 2 51360563e OXYBUTY							
2 31300363e							
3 100003470e ABSORBA							
4 100003461 ACETAMI							
5 100003185e ALBUMIN							
6 100003530 ANALGESI	C BALM 1 POUND		1 A	01-08	01-08	3	90
7 100003400 APPLICAT	ORS, COTTON TIP	STERILE	10 A	09-23	09-23	5	31
+ Enter ?? for m							
PU Patient Record Updat							
PI Patient Information		SO Selec	t Order				
Select Action: Next Scre	en//						

Using List Manager with Outpatient Pharmacy

List Manager is a tool designed so that a list of items can be presented to the user for an action.

For Outpatient Pharmacy, the List Manager does the following:

- Allows the pharmacist or technician to browse through a list of actions
- Allows the pharmacist or technician to take action against those items
- Allows the user to select an action that displays an action or informational profile
- Allows the user to select a different action without leaving an option.

Entering Actions

Actions are entered by typing the name(s), or synonym(s) at the "Select Item(s)" prompt. In addition to "the various actions that may be available specific to a particular option, List Manager provides generic actions applicable to any List Manager screen. A double question mark (??) may be entered at the "Select Action" for a list of all actions available. The following is a list of generic List Manager actions with a brief description. The synonym for each action is shown in brackets following the action name. Entering the synonym is the quickest way to select an action. Outpatient Pharmacy hidden actions are displayed with the letters (OP) next to the action.

Action Next Screen [+]	Description Move to the next screen (may be shown as a default).
Previous Screen [-]	Move to the previous screen.
Up a Line [UP]	Move up one line.
Down a Line [DN]	Move down one line.
Shift View to Right [>]	Move the screen to the right if the screen width is more than 80 characters.
Shift View to Left [<] characters.	Move the screen to the left if the screen width is more than 80
First Screen [FS]	Move to the first screen.
Last Screen [LS]	Move to the last screen.

Action Description

Go to Page [GO] Move to any selected page in the list.

Re Display Screen [RD] Redisplay the current.

Print Screen [PS] Prints the header and the portion of the list currently displayed.

Print List [PL] Prints the list of entries currently displayed.

Search List [SL] Finds selected text in list of entries.

Auto Display (On/Off) [ADPL] Toggles the menu of actions to be displayed/not displayed

automatically.

Quit [QU] Exits the screen (may be shown as a default).

Outpatient Pharmacy Hidden Actions

The Outpatient Pharmacy hidden actions will display with the previous hidden actions once a completed or finished order is selected and a double question mark (??) is entered at the "Select Action:" prompt.

The following hidden actions appear on the Medication Profile screen and can only be applied to one order at a time.

Action Description

Activity Logs [AL] Displays the Activity Logs.

Copy [CO] Allows the user to copy and edit an order.

DIN Displays available drug restriction/guideline information for the

Dispense Drug and Orderable Item associated with the selected

medication order.

Hold [HD] Places an order on a hold status.

Other OP Actions [OTH] Allows the user to choose from the following sub-actions:

Progress Note [PN], Action Profile [AP],

Print Medication Instructions [MI], Display Orders' Statuses [DO], or Non-VA Meds Report [NV]. **Action Description**

Patient Information [PI] Shows patient information, allergies, adverse reactions, and

pending clinic appointments.

Pull Rx [PP] Action taken to pull prescription(s) early from suspense.

Reprint [RP] Reprints the label.

View Reject [REJ] Allows the user to view and resolve the Refill Too Soon or Drug

Utilization Review returned by the third party payer for a

specific prescription/fill claim.

Unhold [UH] Removes an order from a hold status.

Verify [VF] Allows the pharmacist to verify an order a pharmacy technician

has entered.

Speed Actions

These Outpatient Pharmacy actions are referred to as "speed actions" and appear on the Medication Profile screen. These actions can be applied to one or more orders at a time.

ActionDescriptionReprint [RP]Reprints the label.

Renew [RN] A continuation of a medication authorized by the provider.

Refill [RF] A second or subsequent filling authorized by the provider.

Reprint Signature [RS] Reprints the signature log.

Discontinue [DC] Status used when an order was made inactive either by a new

order or by the request of a physician.

Release [RL] Action taken at the time the order is filled and ready to be given

to the patient.

Pull Rx [PP] Action taken to pull prescription(s) early from suspense.

Inpat. Profile [IP] Action taken to view an Inpatient Profile.

CM Action taken to manually queue to CMOP.

Fill/Rel Date Disply [RDD] Switch between displaying the FILL DATE column and the

LAST RELD column.

Display Remote [DR] Action taken to display a patient's remote prescriptions.

Other Outpatient Pharmacy ListMan Actions

Action Description

Exit [EX] Exit processing pending orders.

AC Accept.

BY Bypass.

DC Discontinue.

ED Edit.

FN Finish.

Other Screen Actions

Action Description

Edit/Enter Allergy/ADR Data [EA] Provides access to the Adverse Reaction Tracking package to

allow entry and/or edit of allergy adverse reaction data for the

patient. See the Adverse Reaction Tracking package

documentation for more information on allergy/ADR processing.

Detailed Allergy Display [DA] Displays a detailed listing of the selected item from the patient's

allergy/ADR list. Entry to the Edit Allergy/ADR Data action is

provided with this list also.

Patient Record Update [PU] Allows editing of patient data such as SSN, birth date, address,

phone, and outpatient narrative. Patient data can also be updated using the *Update Patient Record* menu option. If implementing Other Language Modifications, either can be used to set a

patient's other language preference.

New Order [NO] Allows new orders to be entered for the patient.

Exit Patient List [EX] Exit patient Information screen so that a new patient

can be selected.

Chapter 3: Using the *Outpatient Pharmacy Manager* Menu

This manual describes options available on the *Outpatient Pharmacy Manager* menu. This menu should be assigned to supervisors, package coordinators, and members of the Automated Data Processing (ADP)/Information Resources Management Service (IRMS) staff.

Example: Accessing the Outpatient Pharmacy Manager menu

```
Select OPTION NAME: PSO MANAGER Outpatient Pharmacy Manager Outpatient Pharmacy software - Version 7.0
```

The following options are available on the *Outpatient Pharmacy Manager* menu.

- Archiving...
- Autocancel Rx's on Admission
- Bingo Board...
- Change Label Printer
- Clozapine Pharmacy Manager...
- Copay Menu...
- DUE Supervisor...
- Enter/Edit Clinic Sort Groups
- External Interface Menu...
- Label/Profile Monitor Reprint
- Maintenance (Outpatient Pharmacy)...
- Medication Profile
- Output Reports...
- Pharmacy Intervention Menu...
- Process Drug/Drug Interactions
- Release Medication
- Return Medication to Stock
- Rx (Prescriptions)...
- ScripTalk Main Menu...
- Supervisor Functions...
- Suspense Functions...
- Update Patient Record
- Verification...

Patient Lookup

The ability to look up a patient by prescription number or wand a barcode with the prescription has been added to the patient lookup prompt on the following options.

- Patient Prescription Processing [PSO LM BACKDOOR ORDERS]
- *Medication Profile* [PSO P]
- Rx (Prescriptions) [PSO RX]
- *Update Patient Record* [PSO PAT]
- *Manual Print of Multi-Rx Forms* [PSO LM MULTI-RX PRINT]
- ScripTalk Patient Enter/Edit [PSO SCRIPTALK PATIENT ENROLL]
- Patient Address Changes Report [PSO ADDRESS CHANGE REPORT]
- List Prescriptions Not Mailed [PSO BAI NOT MAILED]
- Non-VA Meds Usage Report [PSO NON-VA MEDS USAGE REPORT]
- Enter New Patient [PSO BINGO NEW PATIENT]
- Action Profile (132 COLUMN PRINTOUT) [PSO ACTION PROFILE]
- *Poly Pharmacy Report* [PSOPOLY]

The help text for patient lookup reads as follows.

```
Enter the prescription number prefixed by a # (ex. #XXXXXXX) or Wand the barcode of the prescription. The format of the barcode is NNN-NNNNNN where the first 3 digits are your station number.

OR -

Answer with PATIENT NAME, or SOCIAL SECURITY NUMBER, or last 4 digits of SOCIAL SECURITY NUMBER, or first initial of last name with last 4 digits of SOCIAL SECURITY NUMBER

Do you want the entire NNNNNNNN-Entry PATIENT List?
```

Chapter 4: Using the Archive Menu Option

This chapter describes the options on the Archiving menu.



This menu is locked with the PSOA PURGE key. The PSOA PURGE key should be assigned to all persons responsible for performing these functions.

Archiving

[PSO ARCHIVE]

The *Archiving* menu is used to build a data warehouse and manage resources by saving prescription data to external storage devices like tape, disk, or CD-ROM and then purging old prescriptions, typically those that have expired more than a year ago.

There are eight options on the *Archiving* menu:

- Find
- Save to Tape
- Tape Retrieval
- Archive to File
- File Retrieval
- Purge **> Out of order: Unavailable
- List One Patient's Archived Rx's
- Print Archived Prescriptions

Find

[PSO ARCHIVE FIND]

This option identifies prescriptions that have expired or have been canceled before the selected date; the default date given to the user is 360 days ago. As the *Find* option runs, it prints a dot on the screen for each prescription identified.

Save to Tape

[PSO ARCHIVE TAPE SAVE]

The *Save to Tape* option records all information about the archived prescriptions gathered by the *Find* option to magnetic tape. The tape must be opened for variable length records. The first part of the tape holds an index that lists alphabetically all patients for whom prescriptions are recorded on the tape and, for each patient, a list of his or her prescriptions.

Tape Retrieval

[PSO ARCHIVE TAPE RETRIEVE]

The *Tape Retrieval* option reads information from the tape and prints a summary of all prescriptions for the selected patient. This printed copy should be directed to a printer with 132-column width. Because the retrieval option reads the index first to find the patient, the tape must be rewound before each retrieval. It should be emphasized that this retrieval simply prints the information about the prescriptions. It does not restore this information to the on-line database.

Archive to File

[PSO ARCHIVE FILE SAVE]

The *Archive to File* option records all information about the archived prescriptions gathered by the *Find* option to a Host File Server (HFS) file. The first part of the file holds an index that alphabetically lists all patients for whom prescriptions are recorded and, for each patient, a list of his or her prescriptions. With the proper file name convention (e.g., ARC0797.TMP, ARC0897.TMP, etc.). These files can be grouped and stored on any medium on the operating system for long-term storage. Subsequently, the file can be deleted from the system, in effect producing a manageable data warehouse and freeing up system resources.



Any file name may be chosen for the archiving file. However, it is suggested that a naming convention be used to group the files for easier retrieval

Example: Archive to File

File Retrieval

[PSO ARCHIVE FILE RETRIEVE]

This option reads information from the HFS file and prints a summary of all prescriptions for the selected patient. This printed copy should be directed to a printer with 132-column width. It should be emphasized that the file must be copied from the long-term storage medium back onto the system and that this retrieval simply prints the information about the prescriptions. It does not restore this information to the on-line database.

Example: File Retrieval

```
Select Archiving Option: FILE Retrieval
Host File Server Device: [Select Host File Server Device]
HOST FILE NAME: [Enter the unique name for the file.]
Output Device: [Select Print Device]
Do you want to print the file index? YES
&^NEW
OPPATIENT10, ONE%000987654^4541C, 5107A,
OPPATIENT6, ONE%000135790^5269A,
OPPATIENT16, ONE%000246802^4713,
OPPATIENT17, ONE%000123456^628, 629, 630, 631, 981B,
OPPATIENT2, ONE%000234567^4778,
OPPATIENT29, ONE%000876543^916A,
OPPATIENT31, ONE %000357901^4631,
OPPATIENT11, ONE %000468024^450,
Enter Patient Name: OPPATIENT17, ONE 01-01-09 000123456 NO
                                                                             NSC
VETERAN
THE FOLLOWING SCRIPTS WERE ARCHIVED FOR :
OPPATIENT17, ONE (000123456) - 628, 629, 630, 631, 981B,
OPPATIENT17, ONE
                                                      ID#: 000123456
                                                                           ELIG:
                                                         DOB: 08-30-1948
456 STREET
PHONE: 5556789
CARBON HILL
ALABAMA 32423
CANNOT USE SAFETY CAPS.
DISABILITIES:
REACTIONS: UNKNOWN
```

-----report continues-----

Example: File Retrieval (continued)

	RETRIEVAL FOR OPPATIENT17, ONE	
07/17/07 PAGE 1		
By. 628 DRIIG. ACETAMINOPHEN W/C	CODEINE 15MG TAB TRADE NAME:	OTV 90
30 DAY SUPPLY	CODEINE 19NG IAD	Q11. JU
SIG: T1 TAB 23D PRN		
LATEST: JUN 8,2007	# OF REFILLS: 5 REMAINING: 5 PR	OVIDER:
OPPROVIDER 30 - TWO		
ISSUED: JUN 8,2007	CLINIC: DR. ALBANY	IVISION:
GENERAL HOSPITAL	CLINIC: DR. ALBANY I ROUTING: Window CLE	
LOGGED: JUN 8,2007	ROUTING: Window CLE	RK CODE:
OPCLERK2, FOUR		
EXPIRES:	CAP: NON-SAFETY	STATUS:
Active		
FILLED: JUN 8,2007 PHARMACI	IST: VERIFYING PHARMACIST:	
LOT #:		
NEXT: JUN 28,2007	COPAY TYPE: PSO NSC RX COPAY	NEWCOPAY
TRANSACTION #:		
REMARKS: New Order Created du	ue to the editing of Rx # 479	
	RETRIEVAL FOR OPPATIENT17, ONE	
07/17/07 PAGE 2		
D. 620 DDIIC. ACEMANINODIII	EN W/CODEINE 15MG TAB TRADE N	D ME.
QTY: 90 30 DAY SUPPLY	IN W/CODEINE ISMG IAB IRADE I	IAME:
SIG: T1 TAB 23D PRN		
	# OF REFILLS: 5 REMAINING: 5 PR	OVIDER.
LATEST: JUN 8,2007 OPPROVIDER30,TWO	# OF REFIELDS: 5 REPAINING: 5 II	OVIDER.
	CLINIC: DR ALBANY I	· MOTSTVIT
GENERAL HOSPITAL	CHINIC. DIV. MEDIMI	YIVIDION.
LOGGED: JUN 8,2007	CLINIC: DR. ALBANY I ROUTING: Window CLE	RK CODE:
OPCLERK2, FOUR	100111101 11110011	0022.
EXPIRES:	CAP: NON-SAFETY	STATUS:
Active		
FILLED: JUN 8,2007 PHARMACI	IST: VERIFYING PHA	RMACIST:
LOT #:		
NEXT: JUN 28,2007	COPAY TYPE: PSO NSC RX COPAY	NEWCOPAY
TRANSACTION #:		
REMARKS: New Order Created du	ue to the editing of Rx # 479	

LABEL	. LOG			
#	DATE	REFERENCE	PRINTED BY	COMMENT
1	JUN 8,2007	ORIGINAL	OPCLERK2, FOUR	From RX number 629

[This report has been abbreviated to save space.]

Purge *Temporarily Out of Order*

[PSO ARCHIVE PURGE]

NOTE: This option is inactivated until further notice.

When active, this option deletes all archived prescriptions from the PRESCRIPTION file. On platforms other than PCs, the journaling of the prescription global should be disabled before running this option and then enabled again after the purge is completed.

List One Patient's Archived Rx's

[PSO ARCHIVE LIST RX'S]

This option displays the basic patient statistics and the prescription numbers and dates of archiving for all archived prescriptions for the selected patient.

```
Select Archiving Option: LIST One Patient's Archived Rx's

Show archived prescriptions for: OPPATIENT, TEN OPPATIENT, TEN YES SC VETERAN

DEVICE: HOME// <Enter> GENERIC INCOMING TELNET

OPPATIENT, TEN ID#: 000-12-3499
4 ABBEY LANE DOB: 04-04-1944
LIVERPOOL PHONE: 555-5678
NEW YORK 12202 ELIG: EMPLOYEE

ARCHIVED: 09/10/06 - 100001174, 01/06/07 - 100001229, 100001232,

Please press RETURN to continue
```

Print Archived Prescriptions

[PSOARINDEX]

This option allows the user to print a list of archived prescriptions from the PHARMACY ARCHIVE file.

Chapter 5: Autocanceling

This chapter describes the option for canceling prescriptions for patient who are admitted as inpatients.

Autocancel Rx's on Admission

[PSO AUTOCANCEL1]

Using the *Autocancel Rx's on Admission* option, a job can be tasked every night to cancel the outpatient prescriptions of patients who were admitted three (3) days previous. Enter the desired time to queue the job to run. The time set for the job to run can also be edited with this option. The job should be set to run at a time between 5:30 p.m. and 11:30 p.m. (or as convenient for the site).

```
Select Outpatient Pharmacy Manager Option: Autocancel Rx's on Admission
                          Edit Option Schedule
   Option Name: PSO AUTOCANCEL
   Menu Text: Autocancel on Admission
                                                         TASK ID: 1090241
  QUEUED TO RUN AT WHAT TIME: JUN 27,2007@12:02
DEVICE FOR QUEUED JOB OUTPUT:
QUEUED TO RUN ON VOLUME SET:
      RESCHEDULING FREQUENCY: 1D
             TASK PARAMETERS:
            SPECIAL QUEUEING:
         SAVE
S
         NEXT PAGE
n
         REFRESH
COMMAND:
                                           Press <PF1>H for help
                                                                     Insert
```

(This page included for two-sided copying.)

Chapter 6: Using the Bingo Board Menu

This chapter describes the options available on the Bingo Board menu.

Bingo Board

[PSO BINGO BOARD]

Pharmacy management uses the *Bingo Board* menu to control the bingo board functions. The bingo board notifies a patient that the prescription has been filled. This is accomplished by displaying the patient's name or a number on monitors located in the pharmacy and non-pharmacy (i.e., cafeteria) waiting areas.

The first prompts upon entering Outpatient Pharmacy are to enter the division and label printer. If more than one group has been defined, a prompt to enter a display group will appear. If only one group is defined, it is automatically selected and no prompt appears. If no display group is defined, it is assumed that the site is not set up to run bingo board.

The following options are available on the *Bingo Board* menu:

- BM Bingo Board Manager
- BU Bingo Board User

Bingo Board Manager (BM)

[PSO BINGO MANAGER]

The necessary options to set up the bingo board can be accessed through the *Bingo Board Manager* menu. Before data entry can begin, the division must be defined when entering the software package. Divisions are manager defined, but should be consistent with local policies in order to keep the statistical data relevant. At least one division must be defined.

After the division has been defined, the display parameters must be defined through the *Enter/Edit Display* option. The display group is a uniquely defined location where the patient data will be displayed. As with the division parameter, at least one display group must be defined.

Names now display differently on the bingo board. Names and ticket numbers can be displayed alphabetically in one column, and new names to the board will appear in reverse video for a user-defined amount of time. The user enters the time when creating a display group and it is stored in the GROUP DISPLAY file.



IRMS must set up a dedicated device to be used for the bingo board. Only devices with the sub-type C-VT can be entered at the "DISPLAY DEVICE" prompt. A DEC VT-220 with a coaxial output connected to a cable ready TV monitor is all that is needed on the hardware side.

The following options are available on the *Bingo Board Manager* menu:

- Enter/Edit Display
- Auto-Start Enter/Edit
- Print Bingo Board Statistics
- Print Bingo Board Wait Time
- Purge Bingo Board Data
- Start Bingo Board Display
- Stop Bingo Board Display

Enter/Edit Display

[PSO BINGO ENTER/EDIT DISPLAY]

This option allows locations where the patient data will be displayed to be uniquely defined. Either a new display group name or the name of an existing group to edit or delete can be entered.

If the name is chosen at the "NAME/TICKET" prompt, the "TICKET #" prompt will not appear when a new patient is entered in the *Enter New Patient* option.

The display cannot be changed from name to ticket when patients are already in the Group Display. All patients must be purged using the *Purge Bingo Board Data* option for that Group Display. After the data is purged, the NAME/TICKET field must be edited using this option. Then the patient can be re-entered and ticket numbers assigned.

Example: Enter/Edit Display

```
Select Bingo Board Manager Option: Enter/Edit Display
Select GROUP DISPLAY NAME: MAIN
 Are you adding 'MAIN' as a new GROUP DISPLAY (the 3RD)? Y (Yes)
NAME: MAIN// <Enter> [The name of the Display Group.]
NAME/TICKET: NAME NAME [Select either Name or Ticket # to display.]
MESSAGE:
  1>WEST CLINIC VAMC
  2>[This is a free text field. The message will appear on the screen for the users to view.]
EDIT Option: <Enter>
TWO COLUMN DISPLAY: Y YES [Display names/ticket #'s in one or two column.]
DISPLAY WAIT TIME: Y YES [Average display waiting time.]
NORMAL WAIT TIME: 10 [Normal wait time (in minutes) is entered by the site.]
DISPLAY SETUP HELP TEXT: Y YES
In order to automatically start and stop the bingo board monitor,
a dedicated device must be setup by your IRM Service
Once a dedicated device is setup, the bingo board can be scheduled
to automatically start and/or stop at user-defined times.
```

-----example continues-----

Example: Enter/Edit Display (continued)

```
Enter 'NO' at the DISPLAY SETUP HELP TEXT prompt to not display this help text.

DISPLAY DEVICE: ? [Device dedicated by IRMS for bingo board setup.]

Only devices with Sub-type starting with "C-VT" are allowed.

Answer with DEVICE NAME, or LOCAL SYNONYM, or $I, or VOLUME SET(CPU), or SIGN-ON/SYSTEM DEVICE, or FORM CURRENTLY MOUNTED

DISPLAY DEVICE: [Select print device.]

AUTO-START DISPLAY DEVICE: Y YES [Sets the display group to automatically start.]

Do you want to initialize auto-start now? NO// Y YES

Enter Start Time: ?

Enter time as HH:MM in 12 hour format (For example, '8:00' or '8:00AM).

Enter Start Time: 9:30am [Start time for the display group.]

Enter Stop Time: 4:00pm [Stop time for the display group.]
```



A time that is at least two minutes in the future must be entered at the "QUEUED TO RUN AT WHAT TIME" prompt.

The software will convert it to today's date with the time entered. For example, to queue it to run later today and the current time is 8:00am, a time like 9:30am can be entered. It will default to today's date. To queue for tomorrow, enter a time like **T+1@00:00am/pm**. For example, to queue it for 8:30am and the current time is 3:00pm, **T+1(or tomorrow's date)@8:30am** must be entered.



If the local Outpatient Pharmacy only runs Monday-Friday, enter **D@00:00am/pm** (with D representing "Days of the Week) at the "RESCHEDULING FREQUENCY" prompt. For example, to queue it to run at 7:45am Monday through Friday, enter **D@7:45am**.

Auto-Start Enter/Edit [PSO BINGO INITIALIZE]

This option is used to change the start and stop times of the display groups that have been set up to automatically start and/or stop each day. The scheduling time and frequency can also be changed using this option.

Example: Auto-Start Enter/Edit

```
Select Bingo Board Manager Option: Auto-Start Enter/Edit

You want to edit Display Group(s) Start/Stop times? NO// Y YES

Select GROUP DISPLAY NAME: MAIN

Enter Start Time: 3:00AM// <Enter>
Enter Stop Time: 4:00PM// <Enter>

Select GROUP DISPLAY NAME:
```

See the Enter/Edit Display option for an example of the auto-start screen.

Print Bingo Board Statistics [PSO BINGO REPORT PRINT]

With this option, a report can be generated covering a date range that can be sorted by single division or all divisions. Date ranges in the future are not allowed. The start date must be a date that precedes the end date.

The Bingo Board Report includes totals on number of patients, waiting time, and average waiting time.

```
Select Bingo Board Manager Option: Print
   1 Print Bingo Board Statistics
       Print Bingo Board Wait Time
CHOOSE 1-2: 1 Print Bingo Board Statistics
Start Date: 060907 (JUN 09, 2007)
Ending Date: 070907 (JUL 09, 2007)
Report all Divisions? N// \mathbf{Y} YES
DEVICE: HOME// [Select print device.]
No data found for TROY division for this date range
No data found for ALBANY division for this date range
No data found for JAN division for this date range
No data found for VAL division for this date range
              BINGO BOARD REPORT
                                                  JUL 09, 2007
     REPORT PERIOD: JUN 09, 2007 through JUL 09, 2007
     | DIVISION: All Divisions DATE:
                                             (Time In Minutes)
       TIME PERIOD # PATIENTS SERVED TOT WAIT TIME AVG WAIT TIME
                         0
                                          0.00
       Total
```

Print Bingo Board Wait Time [PSO BINGO REPORT WAIT TIME]

This option allows a report to be printed that sorts the entries in the PATIENT NOTIFICATION (Rx READY) file by Display Group, then Wait Time. This report can be used to keep track of the bingo board activity for a given day. To keep a permanent record of this activity, this report can be printed each day, preferably at the end of the day. The following are definitions of the items found on this report.

Field	Description		
Name	The name of the patient. For a patient with multiple entries, his/her name is printed only once.		
Time In	The time that the patient's name was entered in the computer.		
Time Out	The time that the patient's name was entered on the bingo board monitor.		
Rx#	The prescription number.		
Wait Time	The amount of time it took to fill the prescription. It is the difference between Time In and Time Out. For orders with more than one prescription, the wait time is the same for each.		
Display	The Display Group that the entries were entered under. Multiple site hospitals may have multiple display groups set up to coincide with each site.		
Total	A summation of all the Wait Times in the PATIENT NOTIFICATION (Rx READY) file. It includes the wait time of the patients with multiple entries. For example, if it took 3 minutes to fill each of the three prescriptions for OPPATIENT23,ONE, the Total function sums up the Wait Time as though it took 9 minutes.		
Count	The number of Wait Time entries. It counts the number of wait time entries for each prescription, not each patient.		
Mean	The average or middle value of the Wait Time range of values.		
Minimum	The least Wait Time value in the range.		
Maximum	The greatest Wait Time value in the range.		
Dev. (Deviation)	A relative number which signifies the overall departure from the average.		

If this report is not printed each day, data may be lost because many sites purge the PATIENT NOTIFICATION (Rx READY) file each morning.

Example: Print Bingo Board Wait Time

Select Bingo Board Option: BM Bingo Board Manager							
BINGO BOARD CONTROL PANEL							
Select Bingo Board Manager Option: PRINT 1 Print Bingo Board Statistics 2 Print Bingo Board Wait Time CHOOSE 1-2: 2 Print Bingo Board Wait Time DEVICE: [Select Print Device]							
	(repo	rt follows)					
BINGO BOARD WAIT TIME PRINTOUT	TIME	MAY	21,2007 15:34	PAGE 1 WAIT			
NAME	IN	OUT	Rx#	TIME			
DISPLAY: WAITING ROOM OPPATIENT30, ONE OPPATIENT14, ONE OPPATIENT23, ONE OPPATIENT19, ONE OPPATIENT26, ONE	1503 1503 1509 1509 1509 1509 1509 1509 1524 1524	1504 1504 1512 1512 1512 1512 1512 1512 1512 1527 1527	2004350 2004354 2002744 2006376	1 1 3 3 3 3 3 3 3 3 3			
TOTAL COUNT MEAN MINIMUM MAXIMUM DEV.				33 13 3 1 3			

Purge Bingo Board Data [PSO BINGO PURGE]

With this option all entries can be deleted from the PATIENT NOTIFICATION (Rx READY) file.



It is recommended that data be purged each day. However, if data is not purged, it will not affect the accuracy of the bingo board statistics.

If this option is used before the end of the workday, all data will be lost except the statistical data on those prescriptions already picked up.

Start Bingo Board Display [PSO BINGO START]

The *Start Bingo Board Display* option has been changed so that the bingo board can be started without tying up a terminal or requiring the user who starts it to have multiple sign-on capability. A site parameter has been added to indicate whether a dedicated device has been reserved. If so, the user is prompted to enter the device name. If a dedicated device is set up, the user is able to automatically start or stop the board via TaskMan. The user is also prompted for a Display Group that is saved as a site parameter. This option requires working with local IRMS to complete its setup.

Use this option to start the bingo board display. If there are no prescription entries yet, the message typed in the GROUP DISPLAY will cycle. When the entries begin, the message will be displayed and held for a period of time, then pages of numbers or names will be displayed until all the names have been shown. Then the cycle starts over.



The terminal that executes the option may or may not be the display terminal.

Stop Bingo Board Display [PSO BINGO STOP]

This option is used to stop the bingo board display. The bingo board can be stopped and started as often as desired. It must be stopped if any changes are made to the display group currently being used. This option can be accessed from any terminal.



When the display is stopped and "Yes" entered at the purge prompt, a second prompt displays and allows either all of the display groups or a specific display group to be selected for purging.

Bingo Board User (BU)

[PSO BINGO USER]

The *Bingo Board User* menu enables use of the bingo board display. The options on this menu allow a patient's name or a number to be displayed, entered, or removed from the bingo board display located in the pharmacy area.

When the routing for an order is set to "Window", the entering of prescription orders stores information in the bingo board PATIENT NOTIFICATION (Rx READY) file. For new, renew, pull early from suspense, refill orders, barcode refill/renew, and finish process for orders entered via CPRS, the date and time is captured when the order is stored in this file. The same occurs for partials, except the time is captured when a prescription number is entered.

Releasing the prescription places the name or ticket number of the patient on the bingo board monitor if a display group exists and stores data in the WAITING TIME file. The options on this menu are used to manually enter, display, or remove a patient's name or number from the monitor.

The following options are available on the *Bingo Board User* menu:

- Enter New Patient
- Display Patient's Name on Monitor
- Remove Patient's Name from Monitor
- Status of Patient's Order

Enter New Patient[PSO BINGO NEW PATIENT]

Use this option to manually enter the name of a new patient on the bingo board. Each prescription number for the patient's order must also be entered.

A "Ticket #" prompt displays if ticket number was chosen as the method of display in the *Enter/Edit Display* option on the *Bingo Board Manager* menu. The ticket number will be entered first, and at the next prompt each of the prescription numbers for that patient will be entered.

Display Patient's Name on Monitor [PSO BINGO DISPLAY PATIENT]

Use this option to begin displaying the name or number of a patient whose prescription is ready. The message, "PRESCRIPTIONS ARE READY FOR:" has been added as fixed text to the display screen.

Remove Patient's Name from Monitor [PSO BINGO DELETE PATIENT]

After the patient picks up the prescription, the name or ticket number can be removed from the display either manually or through the barcode reader.



It is recommended that a patient's name be removed from the monitor as soon as the prescription is picked up.

Status of Patient's Order [PSO BINGO STATUS]

This option enables checking of the number of prescriptions a patient has ready, the division, time in/time out, and the prescription number(s). There are four possible statuses:

Status	Description
Pending	Active order input via CPRS that is in the PENDING OUTPATIENT ORDERS file.
Being Processed	Order that is in the PATIENT NOTIFICATION (Rx READY) file, but not displayed.
Ready For Pickup	Order that is in the PATIENT NOTIFICATION (Rx READY) file and is being displayed.
Picked Up	Order that has been picked up.

Example: Status of Patient's Order

```
Select Bingo Board User Option: Status of Patient's Order
Enter Patient Name: OPPATIENT17, ONE
                                              08-30-48
                                                              000123456
                                                                            NO
                                                                                   NSC
VETERAN
         OPPATIENT17, ONE has the following orders for 10/31/06
Being Processed: ***Entered on OCT 31, 2006***
     Division: GENERAL HOSPITAL Time In: 10:27 Time Out:
     Rx #: 500416,
Pending:
     Orderable Item: ACETAMINOPHEN Provider: OPPROVIDER24, TWO Entered By: OPPHARMACIST28, THREE Time In: 10/31/06@06:46 Drug: ACETAMINOPHEN 325MG TAB UD Routing: MAIL
Ready For Pickup:
     Division: GENERAL HOSPITAL Time In: 10:36 Time Out: 10:46
     Rx #: 1022731,
Enter Patient Name:
```

(This page included for two-sided copying.)

Chapter 7: Changing the Label Printer

This chapter describes the Change Label Printer option.

Change Label Printer

[PSO CHANGE PRINTER]

This option allows the user to change the printer to which labels are printed.

```
Select Outpatient Pharmacy Manager Option: Change Label Printer
Select LABEL PRINTER: LABELPRT2// <Enter> LABELPRT2

OK to assume label alignment is correct? YES//<Enter>
```

(This page included for two-sided copying.)

Chapter 8: Controlling the Dispensing of Clozapine

This chapter describes the options available through Outpatient Pharmacy for dispensing Clozapine.

Clozapine Pharmacy Manager

[PSOL MANAGER]



This option requires a security key, PSOLOCKCLOZ.

Use this menu to control the dispensing of Clozapine. The following options are available on this menu:

- Display Lab Tests and Results
- Edit Data for a Patient in the Clozapine Program
- List of Override Prescriptions
- Register Clozapine Patient

The manufacturer requires this dispensing information for Clozapine patients. All members of the Clozapine treatment team must be entered as users on the local system and must be given this key. All pharmacists who have the ability to override the lockouts in this option must also hold the key. These pharmacists should be identified by the pharmacy service representative of the Clozapine treatment team.

The following step must be taken before a prescription for Clozapine can be entered. If this information is missing, Clozapine prescriptions cannot be entered.

Any physician writing a prescription for Clozapine must have a DEA number or VA number entered in the NEW PERSON file. These can be added through the *Add New Providers* option on the *Supervisor's* menu. This must be done before the prescription is entered. The DEA or VA number cannot be entered during the new prescription entry process. With the release of YS*5.01*90, providers must also hold the YSCL AUTHORIZED security key.

When an order is placed, the system checks for the provider's DEA number or VA number first. If the provider does not have either, the following warning displays:

```
Provider must have a DEA# or VA#" to write prescriptions for clozapine
```

If the provider has either the DEA number or the VA number, then the software checks for the assignment of the YSCL AUTHORIZED key. If the provider has a DEA or VA number, but does not hold the YSCL AUTHORIZED key, the following warning displays:

Provider must hold YSCL AUTHORIZED key to write prescriptions for clozapine

Prescriptions for Clozapine are for 7-day, 14-day, or 28-day supply and allow zero to three refills, depending on patient-defined criteria. For a Clozapine prescription, the total daily dose must be entered. If the prescription is for pills to be taken at intervals, enter a number equal to the pill strength times the number of pills per day. If the prescription is for a dose pack, enter the daily dose specified by the dose pack. This entry should be between 12.5 and 900, in increments of 12.5 mg/day. If it is not, a prompt will display asking for the dosage to be confirmed.

Display Lab Tests and Results[PSOLAB LIST]

With this option, lab test results for patients receiving Clozapine can be displayed and monitored. This option should be assigned to all appropriate pharmacists. Monitoring lab test results is required by the Circular 10-90-059 regarding patient management protocol for the use of Clozapine and should be run as specified in the circular. Date ranges for prescription fills should be 7, 14, or 28 days and ranges for lab tests should be at least 30 days.

Edit Data for a Patient in the Clozapine Program [PSOL EDIT]

Use this option to edit data for a patient who has already been enrolled in the Clozapine treatment program. It is typically used to re-register a patient whose treatment has been discontinued and who has rejoined the program.



Local users cannot edit Patient Status within the Clozapine module.

There are two statuses, Pre-Treatment and Active Treatment, that can be selected. Two other statuses, Treatment on Hold and Discontinued, are set by the background job and require the patient to be reregistered.

The Pre-Treatment status is for a registered patient, but who has never received a prescription. If after four weeks (28 days prior to the start date listed for the data collection) the patient does not receive a prescription, the patient status is changed to Discontinued by the background job and the patient must be re-registered.

Patch YS*5.01*90 allows for a monthly prescription as well as weekly and bi-weekly. The Active status is for a patient that has had a prescription within the last 7, 14, or 28 days. If the most recent prescription is over 56 days old, the patient status is now automatically discontinued and the patient must be reregistered.



Sex, race, and ZIP Code should be registered for each patient through Medical Administration Service (MAS)/Business Management Office.

List of Override Prescriptions[PSOLIST OVERRIDES]

As described in Circular 10-90-059, a list of the Clozapine prescriptions entered can be generated by overriding the lockout. This option should be assigned to appropriate pharmacists and should be run weekly.

Register Clozapine Patient [PSOL REGISTER PATIENT]

This option is used to register patients authorized to receive Clozapine by VHA's National Clozapine Coordinating Center (NCCC). Data required by manufacturers of the drug Clozapine is entered into the PHARMACY PATIENT file through this option. Patients registered in this program must have a ZIP code, date of birth, race, and sex entered in the PATIENT file.

Messages for Clozapine Drug Selection

When the Clozapine drug has been selected, the following messages are introduced for dispensing Clozapine according to the scenarios shown in the examples below.



All messages are processed through communication with the Mental Health patch YS*5.01*90.



The "NEUTROPHIL MATURITY, MEAN (ANC) results" verbiage shown in these examples is for illustration only. This can vary, depending on the site definition for ANC calculation.

Example 1: Patient not registered (or not eligible) in the Clozapine program

Now doing drug interaction and allergy checks. Please wait...

Permission to dispense clozapine has been denied. Please contact the Director of the VA National Clozapine Coordinating Center (Phone: 214-857-0068 Fax: 214-857-0339).

Example 2: Patient discontinued from the Clozapine program

```
Now doing drug interaction and allergy checks. Please wait...

*** This patient has been discontinued from the clozapine treatment program ***

*** and must have a new registration number assigned ***

Permission to dispense clozapine has been denied. Please contact the Director of the VA National Clozapine Coordinating Center (Phone: 214-857-0068 Fax: 214-857-0339).
```

Example 3: Clozapine Patient with no LAB work in the past 7 days or if labs are available which have not been entered in VistA, the site will receive the following warning

Now doing drug interaction and allergy checks. Please wait...

Permission to dispense clozapine has been denied. If the results of the latest Lab Test drawn in the past 7 days show WBC>3000/mm3 and ANC>1500/mm3 and you wish to dispense outside the FDA and VA protocol WBC/ANC limits, document your request to Director of the VA National Clozapine Coordinating Center (Phone: 214-857-0068 Fax: 214-857-0339) for a one-time override permission.

A CBC/Differential including WBC and ANC Must Be Ordered and Monitored on a Twice weekly basis until the WBC STABILIZES above 3500/mm3 and ANC above 2000/mm3 with no signs of infection.

Also make sure that the LAB tests, WBC and ANC are set up correctly in the Mental Health package using the CLOZAPINE MULTI TEST LINK option.

If the patient has paper documentation to prove laboratory tests were done (for example, outside the VA system) and the results were within accepted limits, the NCCC can authorize a onetime override. After the NCCC has received and approved this documentation, the following message will display.

Example 4: Onetime override authorized by NCCC

```
Now doing drug interaction and allergy checks. Please wait...

Permission to dispense clozapine has been authorized by NCCC

Override reason being: NCCC AUTHORIZED

Do you want to override and issue this prescription? N//
```

Example 5: When the Patient's WBC <3500 (range 3000 to 3500 for overriding)

Up to four of the last LAB results can be displayed in the message.

Example 6: When the Patient's WBC is above range but ANC <2000 (range 1500 to 2000 for overriding)

```
Now doing drug interaction and allergy checks. Please wait...

*** Most recent WBC and NEUTROPHIL MATURITY, MEAN (ANC) results ***
performed on JUL 26,2006 are:

WBC: 3900
ANC: 1900

*** No previous results to display ***

Override reason being: LAST ANC RESULT < 2000

Do you want to override and issue this prescription? N//
```



In Example 6, previous LAB results did not exist.

Example 7: Patient meets all criteria

```
Now doing drug interaction and allergy checks. Please wait...

*** Most recent WBC and NEUTROPHIL MATURITY, MEAN (ANC) results ***

performed on JUL 27,2006 are:

WBC: 3900

ANC: 2000

CLOZAPINE dosage (mg/day) ?: (12.5-3000):
```

Chapter 9: Handling Copay Charges

The copay status of a prescription is determined at the time of entry and re-evaluated every time a fill for that prescription is released. A prescription will be designated as exempt from copay under the following conditions:

- ✓ The drug is marked as a supply item, nutritional supplement or for investigational use.
- ✓ The Rx Patient Status assigned to the prescription is exempt from copayment.
- ✓ The veteran is copay exempt based on income.
- ✓ The medication prescribed is used in the treatment of:
 - o A Service Connected (SC) condition
 - Combat Veteran (CV)
 - O Vietnam-era herbicide/Agent Orange (AO) exposure
 - o Ionizing Radiation (IR) exposure
 - o Southwest Asia Conditions
 - Shipboard Hazard and Defense (SHAD)
 - o Military Sexual Trauma (MST)
 - o Cancer of the Head and/or Neck (HNC)

The copay status of a prescription is re-evaluated whenever a fill is released. Various actions can occur based on changes to the criteria that determine the copay status of a prescription, including no action, automatic copay status reset, or a MailMan message generated detailing missing information required for user follow up.

Once a veteran meets the designated annual copayment cap, subsequent fills for any prescriptions dispensed will not be charged a copay. Any fills for copay-eligible prescriptions entered after the cap is reached are not billed and are identified as potential charges. If editing the Days Supply of an Rx or returning an Rx fill to stock results in the total copayment of the veteran to fall below the annual cap, Integrated Billing (IB) software shall initiate a copay charge for any fill that was identified as a potential charge until the annual cap is once again reached.

A user will be prompted to respond to any medication copay exemption questions that apply to the patient when entering a new prescription. Responses entered for the medication copay exemption questions are stored with the prescription and display as default values when an order is renewed, copied, or edited in such a way that a new order is created.

If none of the copay exemptions listed apply, the order is released as a copay prescription with no questions asked. (See "Patient Prescription Processing-New Order Entry," for a complete order entry example.)

Example: Entering an Rx for a patient with no applicable medication copay exemptions

If any medication copay exemptions apply to a patient when entering a new prescription, the applicable questions are displayed for the user to respond "Yes" or "No." The responses will be used to determine the copay status of the prescription. The prescription fill will not generate a copay charge when released if at least one of the responses is "Yes." Responses are required.

Example: An order with medication copay exemptions, but no responses entered

```
Rx # 3754648
                     10/24/06
OPPATIENT24, ONE
                            #30
APPLY SMALL AMOUNT TO AFFECTED AREA TWICE A DAY
HYDROCORTISONE 1% CREAM
# of Refills: 11
      SC Percent: 30%
    Disabilities: NONE STATED
Was treatment for Service Connected condition? NO <Enter>
Was treatment related to Combat? NO <Enter>
Was treatment related to Agent Orange exposure? NO <Enter>
Was treatment related to service in SW Asia? NO <Enter>
Was treatment related to PROJ 112/SHAD? NO <Enter>
Was treatment related to Military Sexual Trauma? NO <Enter>
Was treatment related to Head and/or Neck Cancer? NO <Enter>
Is this correct? YES// <Enter>
```

All Service Connected and Environmental Indicators that apply will be asked regardless of a previously entered "Yes" response. SC will be asked for SC 0-100%, but copay charges will continue to be formulated in the same manner.)

```
Was treatment for a Service Connected condition? NO <Enter>
Was treatment related to Combat? NO <Enter>
Was treatment related to Agent Orange exposure? N// Y
Is this correct? YES//
```

A dollar sign is displayed next to the copay prescription number if the copay status is billable.

Example: Billable Copay Status

Copay Menu

[PSOCP MENU]

Users with access to this menu option can exempt an Rx Patient Status from copayment or CHAMPUS billing, reset a prescription's copay status, cancel some or all charges for a prescription, and enter/edit responses to medication exemption questions prompted at order entry.

The following options are available on the *Copay Menu*:

- CHAMPUS Billing Exemption
- Exempt Rx Patient Status from Copayment
- Reset Copay Status/Cancel Charges

CHAMPUS Billing Exemption

[PSOCP CHAMPUS EXEMPTION]

Use this option to select a patient category (Rx Patient Status) to exempt from any CHAMPUS billing.

Example: CHAMPUS Billing Exemption

```
Select Copay Menu Option: CHAMPUS Billing Exemption

Select RX PATIENT STATUS NAME: ZZPOW

EXEMPT FROM CHAMPUS BILLING: ?

Answer YES if this Rx Patient status is to be exempt from Champus billing.
Choose from:

0 NO
1 YES

EXEMPT FROM CHAMPUS BILLING:
```

Exempt Rx Patient Status from Copayment [PSOCP EXEMPTION]

This option allows users to exempt an Rx Patient Status from copayment. A prescription assigned an Rx Patient Status that has been set as exempt from copay will not be charged a copay. A warning is displayed describing the consequences of taking this action and then the user is asked to confirm the change.

Example: Exempt Rx Patient Status from Copayment

```
Select RX PATIENT STATUS NAME: Inpatient

EXEMPT FROM COPAYMENT: NO// Y YES

**** WARNING ****

By setting the Exempt from Copayment for the Rx Patient Status of INPATIENT to 'YES', every prescription entered with this Rx Patient Status will NOT be charged a Copayment.

A mail message will be sent to PSORPH and PSO COPAY Key holders informing them of your change.

Are you sure you want to do this? Y// <Enter> ES

Setting INPATIENT Rx Patient Status to Exempt from Copayment.
```

The warning displayed when removing the copay exemption from an Rx Patient Status differs slightly.

Example: Warning Message

```
By setting the EXEMPT FROM COPAYMENT for the Rx Patient Status of OPT NSC to 'NO', prescriptions entered with this Rx Patient Status from this point on will NOT be exempt from Copayment.
```

A MailMan message is sent to the holders of the PSO COPAY and PSORPH keys whenever the copay exemption status of an Rx Patient Status is changed.

Example: MailMan Message

```
Subj: Exempt from Copayment [#4072] 18 Oct 06 16:29 3 lines
From: OUTPATIENT PHARMACY In 'IN' basket. Page 1 *New*

The INPATIENT Rx Patient Status has been marked as
Exempt from Copayment by OPPHARMACIST3, THREE.
Every prescription with this Rx Patient Status will not be charged a Copayment.
Enter message action (in IN basket): Ignore//
```

The text differs slightly when the copay exemption is removed.

Example: Copay Exemption Removed

```
The Exempt from Copayment status has been removed from the OPT NSC Rx Patient Status by OPPHARMACIST3, THREE.

Prescriptions entered with this Rx Patient Status will not be exempt from Copayment.
```

Reset Copay Status/Cancel Charges [PSOCP RESET COPAY STATUS]

This option combines and enhances the functionality of the previous *Remove Copay Charge* and *Reset Copay Status* options. Three basic functions can be performed with this option:

- The prescription's copay status can be reset.
- Responses to the medication exemption questions can be entered or changed.
- All or selected copay charges can be cancelled.

The actions allowed depend on the copay status of the patient and that of the selected prescription. The user needs to know the prescription number to be changed when accessing this option.

Reset Copay Status

Two methods can be used to change the copay status of a prescription directly. The first method is illustrated below. By entering "Yes" at the "Do you want to reset the status to NO COPAYMENT?" prompt and entering a reason for the reset, the prescription's copay status is changed from COPAY to NO COPAYMENT.

Example: Change the Copay Status

```
Select PRESCRIPTION RX #: 559157

NIACIN (NIASPAN-KOS) 500MG SA TAB

Rx # 559157 is a Copay prescription
```

The reset prompt displays only if there are no exemption flags set to 'Yes.'

```
Do you want to reset the status to NO COPAYMENT? N// \mathbf{Y}ES
Select Reason for Reset : ??
     Choose from:
            RX REFUSED
  1
               RX NEVER RECEIVED
  3
               RX RETURNED/DAMAGED (MAIL)
  4
               ENTERED IN ERROR
  5
              RX CANCELLED
  6
              INPATIENT/PASS
  7
              INVESTIGATIONAL DRUG
  8
              RX DELETED
  9
              EMPLOYEE
  10
              CNH - 3 DAY
  11
              PATIENT DECEASED
  12
              SUPPLY ITEM
  13
             BEDSIDE MEDICATIONS
  14
              ELIGIBILITY INCORRECT
  15
              CHANGE IN ELIGIBILITY
  16
              RX EDITED
              RX COPAY INCOME EXEMPTION
  21
  33
               AGENT ORANGE RELATED
  34
               IONIZING RAD RELATED
  35
               SOUTHWEST ASIA RELATED
  37
              MILITARY SEXUAL TRAUMA
  38
              COPAY CAP REACHED
  39
              CANCER OF HEAD/NECK
  40
             PHARMACY AUTO CANCELLED
```

Example: Change the Copay Status

```
44 COMBAT VETERAN
45 RX FOR FORMER POW
46 RX FOR UNEMPLOYABLE VETERAN
47 KATRINA AFFECTED VETERAN
48 PROJECT 112/SHAD

Select Reason for Reset: 15 CHANGE IN ELIGIBILITY
```

The change is recorded in the Copay Activity Log for this prescription.

Example: Copay Activity Log

Copay Activity Log:						
#	Date	Reason	Rx Ref	Initiator Of Activity		
1	10/24/06	COPAY RESET	ORIGINAL	OPPROVIDER9,TWO		
Com	ment: CHANGE	IN ELIGIBILITY O	ld value=Copay	New value=No Copay		

Resetting the copay status does not involve canceling any incurred copay charges. The new copay status applies to future fills only. Any past charges billed will not be cancelled automatically. The canceling of copay charges is independent of the reset function.

Enter/Edit Medication Exemption Question Responses

The second way a user can directly reset the copay status of a prescription is to use the *Reset Copay Status/Cancel Charges* option to enter or edit any existing responses to the medication exemption questions displayed during order entry. Only those medication exemptions that apply to the patient for which the prescription is written can be modified. Any existing response to an exemption question displays to the user after entering the prescription number and the user is asked about entering or editing any copay exemption flags.

In the following screen example, *Reset Copay Status*, the <50% SC, Agent Orange (AO) exposure, PROJ 112/SHAD, and Military Sexual Trauma (MST) medication exemptions apply to the veteran for which Rx# 3754533 has been entered. SC, AO, and SHAD exemption defaults of "No" display because values already exist. The MST exemption does not display because a response has never been entered.

Prompts display for Service Connected and all Environmental Indicators that are flagged for the veteran in Enrollment.

The user is prompted to respond to "Do you want to enter/edit any copay exemption flags?" If the user responds "Yes", each medication exemption that applies to the veteran will be presented for editing. All three medication copay exemptions are presented for editing, including the MST exemption for which a response did not exist. "Yes" is entered for the MST exemption question and a system message indicates that the copay status of the Rx is reset to No Copay by this action.

Example: Reset Copay Status

```
Select Copay Menu Option: RESET Copay Status/Cancel Charges
Select PRESCRIPTION RX #:
                               3754533
                                            HYDROCORTISONE 1.0% CREAM
Rx # 3754533 is a Copay prescription < Current copay status of Rx> appears.
The following exemption flags have been set:
               <If any exemption flags have values they will be displayed after the copay status</p>
SC:
AO:
      No
Do you want to enter/edit any copay exemption flags? Y// < Enter> ES
Was treatment for a Service Connected condition? N// <Enter> O
Was treatment related to Agent Orange exposure? N// <Enter> 0
Was treatment related to PROJ 112/SHAD? N// <Enter> O
Was treatment related to Military Sexual Trauma?// YES
Editing of exemption flag(s) has resulted in a copay status change.
The status for this Rx will be reset to NO COPAY.
Do you want to cancel any charges (Y/N)? N < This prompt appears only if this Rx has incurred any charges.
```

The Copay Activity Log for this order shows the record of the change.

Example: Copay Activity Log

С	Copay Activity Log:								
#	Date	Reaso	n		Rx Ref		Initiator	Of Activity	
==						=====			====
1	10/24/06	COPAY	RESET		Refill	2	OPPROVIDER	R9,TWO	
	Comment: MI	ILITARY	SEXUAL	TRAUMA	RELATED	Old	value=Copay	New value=No	copay

NOTE

The copay status of an Rx will not be reset from a "No" Copay to Copay status based strictly on a response to a medication exemption question.

Cancel Charges

A user can select to remove all or specific charges for a prescription fill. If the user chooses to cancel a specific charge, a list of fills/refills is displayed showing the fill reference and release date. Any charge that has already been cancelled or any fill that has not been billed due to the veteran meeting the annual copay cap will be identified.

Example: Cancel Copay Charges

Typing a "??" at the "Select Reason for Reset or Charge Cancellation" prompt lists the same reasons displayed previously in the "Reset Copay Status" section. Once the reason for the change is entered, a summary of all the actions taken on the prescription is displayed.

Example: Summary of Actions

```
Editing of exemption flag(s) has resulted in a copay status change.

The status for this Rx will be reset to NO COPAY.

Select Reason for Reset or Charge Cancellation: 1 RX REFUSED

Copay status reset due to exemption flag(s)

The following exemption flags have been changed:
EC: Yes
MST: Yes
Rx # 3754533 - Refill 3 copay charge cancelled

Select PRESCRIPTION RX #:
```

The Copay Activity Log shows the canceled charge as REMOVE COPAY CHARGE.

Example: Copay Activity Log

Potential Charges and Partial Charges

In this example, the prescription is for a 90-day supply. When Refill #2 was released, the veteran met his annual copay cap and the fill was not billed. An entry is made in the Copay Activity Log to document when a prescription fill is not billed due to the annual copay cap. A fill is identified as a potential charge when NO BILLING was performed.

Example: Copay Activity Log for No Bill

```
Rx Activity Log
                        Oct 23, 2006 @13:53:02
OPPATIENT9, ONE
 PID: 000-76-5432P
                                          Ht (cm): 169.55 (03/06/2006)
 DOB: NOV 18,1950 (55)
                                          Wt(kg): 125.45 (03/06/2006)
Rx #: 459166 Original Fill Released: 03/12/06
             Finished by: OPPHARMACIST27, THREE
Routing: Mail
Copay Activity Log:
  Date Reason
                            Rx Ref Initiator Of Activity
        _____
1 10/23/06 ANNUAL CAP REACHED REFILL 2 OPPHARMACIST15, THREE
Comment: NO BILLING FOR THIS FILL
```

The list of fills associated with this order, as seen in the *Reset Copay Status/Cancel Charges* option, would show Refill #2 as a Potential Charge.

Example: Reset Copay Status/Cancel Charges for Potential Charge

```
1. Original fill (03/06/06)
2. Refill #1 (05/24/06)
3. Refill #2 (10/23/06) (Potential Charge *)

* Potential charge indicates fill was not billed due to the annual cap.
If cancelled, this fill will not be considered for future copay billing.
```

If the same Refill #2 is released and the veteran reaches the annual copay cap after the first 30 days of the 90-day supply is billed, the Copay Activity Log will indicate that the veteran was partially billed due to the annual cap.

Example: Copay Activity Log

```
Copay Activity Log:

# Date Reason Rx Ref Initiator Of Activity

1 10/26/06 ANNUAL CAP REACHED REFILL 2 OPPHARMACIST15, THREE

Comment: PARTIAL BILLING FOR THIS FILL
```

Refill #2 will not be identified as having a potential charge because partial billing was done.

Example: Reset Copay Status/Cancel Charges for Partial Charge

```
1. Original fill (03/06/06)
2. Refill #1 (05/24/06)
3. Refill #2 (10/23/06)
```

If Refill #2 is cancelled, the partial charge (for 30 day supply) is cancelled and the remaining 60-day supply that was not charged is removed from consideration for future copay billing. Only one entry is entered in the Copay Activity Log.

Example: Copay Activity Log

	Copay Act	tivity Log:		
#	Date	Reason	Rx Ref	Initiator Of Activity
===				
1	10/26/06	ANNUAL CAP REACHED	REFILL 2	OPPHARMACIST15, THREE
	Comment:	PARTIAL BILLING FOR	THIS FILL	
2	10/29/06	REMOVE COPAY CHARGE	REFILL 2	OPPHARMACIST15, THREE
	Comment:	RX REFUSED		

Once a potential charge has been cancelled, it will be dropped from the list of incurred charges that are displayed.

IB-initiated Medication Copay Charge

There are times when the medication copay status of a prescription can be changed by a background process. In this example, another prescription for the same veteran was returned to stock, dropping copayments below the annual cap. Integrated Billing (IB) goes through all of the prescriptions looking for any that were not billed a copay because the annual cap was reached. IB initiates a copay charge against any such prescriptions that are found until the copay cap is again reached.

Example: An IB-initiated Medication Copay Charge

Rx Activity Log	Nov 05, 2006@17:1	8 Page: 1 of	1			
OPPATIENT9, ONE						
PID: 000-76-5432P		Ht(cm): 169.55 (03/06				
DOB: NOV 18,1950 (55)		Wt(kg): 125.45 (03/06	/2006)			
Routing: Window Finished 1						
Copay Activity Log:						
# Date Reason	Rx Ref	Initiator Of Activit	У			
1 10/00/06 200000						
1 10/09/06 ANNUAL CAP REAC Comment: NO BILLING FOR THIS		OPPHARMACIST1, THREE				
	FILL	OPPHARMACIST1, THREE OPPHARMACIST1, THREE				

Chapter 10: Evaluating Drug Usage

This chapter describes the options on the *DUE Supervisor* menu.

DUE Supervisor

[PSOD SUPERVISOR]

This menu provides options to create a questionnaire based on the criteria of a Drug Usage Evaluation and print an answer sheet for the provider's use in answering the questionnaire. The answer sheet can be printed and distributed to the clinic so that the provider may complete it when ordering a medication being evaluated. An answer sheet can also be generated (optional) when a patient's Action Profile prints, if the profile contains a medication being evaluated. The provider's responses can be entered into the DUE ANSWER SHEET file.

The following options are available on the *DUE Supervisor* menu:

- 1 Enter a New Answer sheet
- 2 Edit an Existing Answer Sheet
- 3 Create/Edit a Questionnaire
- 4 Batch Print Questionnaires
- 5 DUE Report

Enter a New Answer Sheet[PSOD CREATE ANSWER SHEET]

In this option, the user enters answers to a DUE Questionnaire. This creates an answer sheet entry in the DUE ANSWER SHEET file. These answer sheets can be kept online for statistical and/or compliance studies. Answer sheets are stored in the file using a sequence number. This number is automatically generated by the computer and should be written on the hard copy of the answer sheet immediately so that it can be used later in editing or deleting the entry.

Edit an Existing Answer Sheet [PSOD EDIT ANSWER SHEET]

Edit a DUE Answer Sheet entry using this option. Ordinarily, the sequence number is available when editing the Answer Sheet; however, the user can search the file if the provider, drug, or questionnaire is known by typing ^S at the "SEQUENCE NUMBER" prompt. The search displays all of the entries containing the combination of provider, drug, or questionnaire used in the search.

Create/Edit a Questionnaire[PSOD DUE BUILD QUESTIONNAIRE]

To create a questionnaire, first select one or more drugs being evaluated. After selecting the drugs, create a set of questions to be used on the questionnaire. These questions do not have to be added to the DUE QUESTION file since they are being added through this option. The questionnaire must be marked as "Active" and "Active for Profiles" for the Answer Sheet to automatically print with the Action Profiles. A summary can be printed for the questionnaire using the *DUE Report* option. For this reason, when creating a questionnaire, the user should strive to make each question a yes, no, or unknown type question. Questions having a free text or numeric type answer are ignored in the summary.



The PRINT DUE QUESTIONNAIRE site parameter needs to be set to "YES" for the questionnaire to print with the Action Profile.

Batch Print Questionnaires[PSOD BATCH PRINT QUESTIONNAIRE]

To print a blank form of a selected questionnaire, enter the number of copies and a printer device. These questionnaire answer sheets can be distributed to providers to complete when ordering medications being evaluated.

DUE Report[PSOD DUE SORT AND PRINT]

This report displays entries from the DUE ANSWER SHEET file. A summary of this report is available, showing the number of answer sheets, number of questionnaires, and a breakdown of all yes/no/unknown type questions. This breakdown shows each question number and the number of times it was answered yes/no/unknown, or unanswered. For this reason, when creating a questionnaire, the user should strive to make each question a yes, no, or unknown type question. Questions having a free text or numeric type answer are ignored in the summary.

Chapter 11: Enter/Edit Clinic Sort Groups

This chapter describes the Enter/Edit Clinic Sort Groups option.

Enter/Edit Clinic Sort Groups

[PSO SETUP CLINIC GROUPS]

This option enables the user to identify a group of clinics that will print together for the action/informational profiles.

Example: Enter/Edit Clinic Sort Groups

```
Select Pharmacist Menu Option: ENTer/Edit Clinic Sort Groups
Select Clinic Sort Group: ?
Answer with OUTPATIENT CLINIC SORT GROUP NAME
Choose from:
  CLINIC 1
   CLINIC 2
    You may enter a new OUTPATIENT CLINIC SORT GROUP, if you wish
    Answer must be 3-30 characters in length.
Select Clinic Sort Group: CLINIC 3
 Are you adding 'CLINIC 3' as
    a new OUTPATIENT CLINIC SORT GROUP (the 6TH)? Y < Enter> (Yes)
NAME: CLINIC 3// <Enter>
Select SORT GROUPS: ?
Answer with SORT GROUP SORT GROUPS
    You may enter a new SORT GROUP, if you wish
    Enter name of clinic to be included in the sort group.
Answer with HOSPITAL LOCATION NAME, or ABBREVIATION
Do you want the entire 122-Entry HOSPITAL LOCATION List? N (No)
Select SORT GROUPS: 2 EAST
 Are you adding '2 EAST' as a new SORT GROUP (the 1ST for this OUTPATIENT
CLINIC SORT GROUP) ? Y (Yes)
Select SORT GROUPS: < Enter>
```

(This page included for two-sided copying.)

Chapter 12: External Interface Menu

This chapter describes the options on the External Interface Menu.



This menu is locked with the PSOINTERFACE lock. The PSOINTERFACE key should be assigned to all persons responsible for performing these functions.

External Interface Menu

[PSO EXTERNAL INTERFACE]

This menu contains the following options for using an external interface device.

- Purge External Batches
- Reprint External Batches
- View External Batches

Purge External Batches

[PSO INTERFACE PURGE]

This option purges entries from the PHARMACY EXTERNAL INTERFACE file.

Example: Purge External Batches

```
Select External Interface Menu Option: Purge External Batches
Enter cutoff date for purge of External Interface file: 022807 (FEB 28, 2007)

Purge entries that were not successfully processed? NO// <Enter>

Purge queued to run in background.

Select External Interface Menu Option:
```

Reprint External Batches

[PSO INTERFACE REPRINT]

This option enables the reprinting of labels for batches of prescriptions that have been sent to the external interface.

Example: Reprint External Batches

```
Select External Interface Menu Option: Reprint External Batches
Enter a date/time range to see all batches sent to the External Interface.
Start date/time: 022807 (FEB 28, 2007)
End date/time: 030707 (MAR 07, 2007)
Gathering batches, please wait...
 BATCH QUEUED TO PRINT ON: PATIENT: ALBANY
 1 FEB 28,2007@08:06:14 OPPATIENT12,ONE
2 FEB 28,2007@08:10:56 OPPATIENT12,ONE
3 FEB 28,2007@08:19:20 OPPATIENT22,ONE
4 FEB 28,2007@08:38:17 OPPATIENT28,ONE
5 FEB 28,2007@08:50:32 OPPATIENT9,ONE
6 FEB 28,2007@09:15:35 OPPATIENT9,ONE
7 FEB 28,2007@09:33:48 OPPATIENT18,ONE
  8 FEB 28,2007@U9:39.31
9 FEB 28,2007@10:36:51
                                               OPPATIENT1, ONE
                                               OPPATIENT10, ONE
          FEB 28,2007@13:37:24
FEB 28,2007@13:46:07
                                               OPPATIENT4, ONE
  11
                                                OPPATIENT8, ONE
Select Batch(s) to reprint: (1-11): 5,6
Batches selected for Reprint are:
Batch 5 Queued for FEB 28,2007@08:50:32 by OPPHARMACIST4, THREE
Batch 6 Queued for FEB 28,2007@09:15:35 by OPPHARMACIST4, THREE
Before Reprinting, would you like a list of these prescriptions? N// <Enter> O
Are you sure you want to Reprint labels? Y// <Enter> YES..
Select LABEL DEVICE: [Select Print Device]
LABEL(S) QUEUED TO PRINT!
Select External Interface Menu Option:
```

View External Batches

[PSOINTERFACE VIEW]

With this option the user can view batches of prescriptions that have printed from the external interface.

Example: View External Batches

```
Select External Interface Menu Option: View External Batches

Enter a date/time range to see all batches sent to the External Interface.

Start date/time: 022807 (FEB 28, 2007)

End date/time: 030707 (MAR 07, 2007)

Gathering batches, please wait...
```

BATCH	QUEUED TO PRINT ON:	PATIENT:	BROWNS	PLACE
2 3 4 5 6 7 8 9		OPPATIENT12, ONE OPPATIENT22, ONE OPPATIENT28, ONE OPPATIENT9, ONE OPPATIENT9, ONE OPPATIENT18, ONE OPPATIENT1, ONE OPPATIENT10, ONE OPPATIENT4, ONE		
Select Ba	atch(s) to reprint: (1-11): !			
Batches selected for Viewing are: Batch 5 Queued for FEB 28,2007@08:50:32 by OPPHARMACIST4, THREE Batch 6 Queued for FEB 28,2007@09:15:35 by OPPHARMACIST4, THREE				
	St to the screen or to a print CURN to continue or '^' to exi		n// <ent< b=""></ent<>	er>
RX #	NAME -> OPPATIENT9,	ONE	BAT	СН 5
2820	NADOLOL 40MG TAB		ACT	IVE
Enter RETURN to continue or '^' to exit: <enter></enter>				
RX #	NAME -> OPPATIENT9,0	ONE	BAT	СН 6
2821 END OF LI	MICONAZOLE NITRATE 2	2% LOT 60ML	ACT	

(This page included for two-sided copying.)

Chapter 13: Label/Profile Monitor Reprint

This mini-chapter defines the option for handling printer malfunctions.

Label Profile Monitor Reprint

[PSO B]

When a printer malfunction occurs, up to 1000 (or more depending on the Label Profile Monitor Max site parameter) damaged labels or profiles can be reprinted. Enter the failed output device name and the last usable label or profile.

Chapter 14: Implementing and Maintaining Outpatient Pharmacy

Maintenance (Outpatient Pharmacy)

[PSO MAINTENANCE]

The *Maintenance (Outpatient Pharmacy)* menu contains the options that are used for implementing and maintaining the Outpatient Pharmacy software. These options are:

- Site Parameter Enter/Edit
- Edit Provider
- Add New Providers
- Queue Background Jobs
- Autocancel Rx's on Admission
- Bingo Board Manager ...
- Edit Data for a Patient in the Clozapine Program
- Enter/Edit Clinic Sort Groups
- Initialize Rx Cost Statistics
- Edit Pharmacy Intervention
- Delete Intervention
- Auto-delete from Suspense
- Delete a Prescription
- Expire Prescriptions
- Manual Auto Expire Rxs
- Prescription Cost Update
- Purge Drug Cost Data
- Purge External Batches
- Recompile AMIS Data

Site Parameter Enter/Edit [PSO SITE PARAMETERS]

This option is used to establish and edit parameters for the Outpatient Pharmacy software application. The following table lists each parameter and its corresponding description. These fields are contained in either the OUTPATIENT SITE file or the PHARMACY SYSTEM file.

Site Parameter	Description
NAME	This field contains the name of the site.
MAILING FRANK STREET ADDRESS	This field is used for the address of the outpatient site.
AREA CODE	This field is used for the area code of the outpatient site.
PHONE NUMBER	This field is used for the telephone number of the outpatient site.
MAILING FRANK ZIP+4 CODE	This field is used for the zip code of the outpatient site. This field will allow zip+4 format (excluding the "-")
SITE NUMBER	This field is used to show the site/station number.
NCPDP NUMBER	This field is the site-specific National Council for Prescription Drug Programs number (NCPDP), formerly referred to as the National Association of Boards of Pharmacy Number (NABP).
MAILING FRANK CITY	This field is used for the city in which the outpatient site is located.
MAILING FRANK STATE	This field is used to show the state in which the outpatient site resides.
MAILING COMMENTS	This field will be printed on the laser labels mailing address label. It can contain anything the site deems appropriate (i.e. whether mailing is "Forwarding service requested" or "Address service requested", etc.)
INACTIVE DATE	This date will indicate that the Outpatient Site is no longer active, and cannot be selected through the Outpatient Pharmacy options.
HOLD FUNCTION?	This site parameter is used to determine if the 'Hold' function will be used at the medical facility.
SUSPENSE FUNCTION?	This site parameter will be used to determine if the 'Suspense' feature will be used at the medical facility.
CANCEL DRUG IN SAME CLASS	Prescriptions with duplicate classes can only be discontinued if this site parameter is set to 'Yes' and if the Rx has not been put on hold through CPRS.
REFILL INACTIVE DRUG RXS	This will be used to determine if inactive drugs will be used to refill active prescriptions.
ASK METHOD OF PICKUP	This field will be used to determine if method of pickup will be asked for window prescriptions.
PASS MEDS ON PROFILE	This field is used to determine if pass medication within specified date range will be listed on profiles.
PROFILE 'SORT BY' DEFAULT	This field will be used to determine the sort order of medications on profiles.
COPIES ON NEW	This field will be used to determine the number of copies for labels to print.

Site Parameter	Description
DRUG CHECK FOR CLERK	This field is used to determine if the duplicate drug warnings should be shown for non-pharmacist.
FEE BASIS SUPPORT	This field is used to determine if fee basis prescriptions are processed.
MULTI RX REQUEST FORM	This field is used to determine if the multiple prescription request forms are printed with medication labels.
BARCODES ON REQUEST FORMS	This field is used to determine if barcodes are printed on profiles, labels, and multi request forms.
BARCODES ON ACTION PROFILES	This field is used to indicate if barcodes are to print with the action profiles. The printer used must be setup or have barcode capabilities for the barcodes to print. Contact IRM to help determine which printers have barcode capabilities.
VERIFICATION	This field is used to determine if prescriptions entered by a non-pharmacist are placed in a non-verified status.
DISPLAY GROUP	This field is used to determine which bingo board display screen will be shown on the waiting room monitor.
SCREEN PROFILES	This field is used to determine if profiles are displayed when refilling and renewing medications.
EDIT PATIENT DATA	This field is used to determine if editing of patient data will be allowed.
EDIT DRUG	This field will be used to determine if drugs can be changed during prescription edit.
RENEWING RX'S ALLOWED	This field will be used to determine if renewing of medications will be allowed.
PASS MEDS CANCEL	This field is used to determine if pass medications are to be cancelled.
AUTO SUSPEND	This field is used to determine if medication that is refilled or renewed before the next possible fill date is to be placed in suspense automatically.
SHALL COMPUTER ASSIGN RX #S	This field is used to determine if the computer will auto generate prescription numbers.
PROFILE WITH NEW PRESCRIPTIONS	This field is used to determine if medication profiles are printed when new medication is ordered.
SLAVED LABEL PRINTING	This field will be used to allow printing of RX labels without being able to queue to a printer.
	This parameter is primarily for slaved printing of RX labels. If 'yes' is the answer the prompt or action to be taken on the label will include the '/PRINT' action.
METHADONE PROGRAM	This field will be used to determine if the site has a methadone program and if a particular drug should be prompted for.
METHADONE DRUG	This field will be used to show what drug is being used if the site has a methadone program.
DAYS TO PULL FROM SUSPENSE	This field will be used to pull a patient's medication from suspense for a specified number of days. The day range is from 0 to 10.
DAYS TO PULL SUSPENDED CS CMOP	This field will be used to pull a patient's controlled substances from suspense for CMOP medications for a specified number of days. The range is between 0 and 10.

Site Parameter	Description
NEW LABEL STOCK	This field will be used to determine which medication label stock will be used.
EXTERNAL INTERFACE	This field allows sites to alter the characteristics of the external interface. The Set of Codes field have the following values:
	0 - the external interface is off
	1 - send all drugs to the external interface; print labels locally
	2 - send all drugs to the external interface; don't print labels locally
	3 - send only marked drugs to the external interface; don't print labels locally 4 - send only marked drugs to external interface and print labels through VistA.
DISPENSING SYSTEM PRINTER	This field identifies the name of the printer(s) that, when selected, and the interface is in use, an HL7 message is generated to the dispensing system.
BLANK LABEL BETWEEN PATIENTS	This field will determine if a blank label should print between patients on the label printers.
VERIFYING PHARMACIST ON LABELS	This site parameter will determine if the name of the verifying pharmacist or the name of the person who made the order request will print on the Rx label. If the parameter is set to Yes the verifying pharmacist name will print.
AUTOMATED DISPENSE	This field will determine what version of the automated dispense machine this site is running. If the machine is older than HL7 V.2.4, enter letter O, if HL7 V.2.4 has been installed, enter 2.4.
FILE RELEASE DATE/TIME	This field is used to indicate if the release date/time is to be filed for the prescription dispensed by an external interface.
ENABLE MASTER FILE UPDATE	This field will determine if the automated dispense machines are ready to receive HL7 V.2.4 messages.
DISPENSE DNS NAME	This is the DNS computer name of the automated dispensing machine that is used for this outpatient site division.
DISPENSE DNS PORT	Enter the DNS port number associated with the automated dispense machine for this outpatient pharmacy site division.

The CPRS ORDERING INSTITUTION field in the OUTPATIENT SITE file allows multiple Institutions to be entered for the local site. If more than one Institution is entered for a site, the user can select the appropriate Institution when using the *Complete Orders from OERR* option and complete Pending Orders from clinics that are associated with the specific Institution selected.

Site Parameter	Description
CPRS ORDERING INSTITUTION	This field is used when completing orders from CPRS. If there is only one Institution entry, then when completing orders from CPRS under this Outpatient site, only those orders from that Institution will be shown. If there is more than one entry, then the Institution will be prompted for when completing orders from CPRS, and only those orders associated with that Institution selected will be shown.
RELATED INSTITUTION	Institution associated with the site.
LOGICAL LINK	This is a pointer to the Logical Link file (#870). This link is used to transmit messages to an external (client) application. This field is not filled in when messages are exchanged between DHCP applications on the same system. This field will be used as the Logical Link for the prescription if there is a Clinic associated with the prescription, and the Institution derived from that Clinic has an entry in this CPRS ORDERING INSTITUTION multiple with an associated Logical Link.
NPI INSTITUTION	This is the institution or division that has the National Provider Identifier (NPI) value for this Outpatient Site. No two Outpatient Site entries in this file should point to the same INSTITUTION file entry. (Note that the RELATED INSTITUTION field differs from this field and is the parent institution which may be the same for any or all of the Outpatient Site entries.)
LABEL/PROFILE MONITOR MAX	Maximum number of label/profiles to be stored in the Label/Profile Monitor list for each printer device. The default and minimum value for this number is 1000. Each time the printer is used an entry is made in the Label/Profile monitor and if the monitor holds more entries than specified by this parameter, the oldest entry is deleted.
NARCOTICS NUMBERED DIFFERENTLY	This field is used to determine if narcotics will be numbered differently from other medications/supplies.
NARCOTIC LOWER BOUND	This field is used to determine what prescription numbers narcotics are to start with if narcotics are numbered differently from other prescriptions/supplies.
NARCOTIC UPPER BOUND	This field is used to determine the highest prescription number used for narcotics if this type of medication is numbered differently from other medications/supplies.
LAST NARCOTIC NUMBER ISSUED	This field is used to indicate last number issue d for narcotic medications.
PRESCRIPTION # LOWER BOUND	This field is used to enter the lowest prescription number for this site.
PRESCRIPTION # UPPER BOUND	This field is used to enter the highest prescription number for this site.
LAST PRESCRIPTION # ISSUED	This field is used to store the last RX number used.
IB SERVICE/SECTION	Select the appropriate entry in the Service/Section file (#49) that is to be used for the Pharmacy Copayment/Integrated Billing procedures.

Site Parameter	Description
NARRATIVE FOR COPAY DOCUMENT	This field contains information from the site regarding the copayment procedures for the patient to follow upon receipt of the copay document. For example, information may include a telephone number to call regarding billing inquiries, a payment mailing address, etc.
NARRATIVE REFILLABLE RX	This field contains information from the site regarding procedures for the patient to obtain a refill of his refillable medication. May include the address, phone number, etc. that will assist the patient.
NARRATIVE NON- REFILLABLE RX	This field contains information from the site regarding procedures for the patient to obtain a new prescription for his non-refillable medication. This field may contain address, phone number, etc that will assist the patient.
CHARGE LOCATION	This field is a pointer to the Hospital Location File (#44). Multi-division sites should populate this field for each division. This data could be obtained from the Business Office of the Medical Center.

The CHARGE LOCATION field is used to group charges in the COTS billing system according to the type of service.

IMPORTANT

Entering and defining the Charge Locations is crucial to the success of this function. Initially, however, a unique Outpatient Pharmacy Location must be entered in the HOSPITAL LOCATION file by Registration or Scheduling. It is recommended that the Location be coordinated with the Medical Center's business office. A Charge Location should be defined for every division currently in the OUTPATIENT SITE file, which means that there could be multiple hospital locations or one location for all divisions.

If a Charge Location is not defined for a particular division, Outpatient Pharmacy will search all active divisions in the OUTPATIENT SITE file for a Charge Location entry and use the first one it finds. If the PFSS switch is ON and no Charge Locations are defined in any divisions, the information will not be passed on to IB or the COTS billing system and no charge takes place.

Information in the CHARGE LOCATION field cannot be deleted, but it can be replaced with entry of another Charge Location.

Site Parameter	Description
SCRIPTALK DEVICE	This field contains a pointer to the ScripTalk printer device in the device file.
SCRIPTALK AUTO- PRINT SETTINGS	Set this to 'A' to have a ScripTalk label automatically print for ScripTalk-enrolled patients whenever their regular medication label prints. Set to 'M' if ScripTalk labels will be printed manually.
DEFAULT OUTPATIENT SITE	The outpatient site (and parameters) which will be used for ward order entry. An entry in this field will bypass the site selection prompt when entering outpatient from OE/RR.
ADMISSION CANCEL OF RXS	This field is used to determine if outpatient medication will be cancelled after 72 hours of an admission to the medical center.
EXEMPT WARD FROM AUTOCANCEL	For all of the WARD LOCATIONS entered, prescriptions for patients on these wards will not be canceled by the Autocancel RX's on Admission Outpatient Pharmacy system job.
DAYS PRINTED RX STAYS IN 52.5: 7	This field contains the number of days printed prescriptions are to remain in the RX SUSPENSE file when running the Delete From Suspense File option. The number of days to remain may be from 7 to 90.
POLYPHARMACY W/ACTION PROFILE	This field is used to determine if a polypharmacy report prints with action profile across all divisions.
INTERDIVISIONAL PROCESSING	This field is used to indicate if interdivisional processing is to occur.
DIVISION PROMPT ASKED	This field is used to indicate if the 'Division' prompt is to be asked.
REFILL/RENEW DIVISION	This field is used to indicate the refill/renew division for multi divisional sites.
PROCESS AUTO REFILLS FOR INPAT	This flag should be set to Yes, only if the site wants the scheduled AUTO REFILL [PSO AUTO REFILL] option to process refills for patients who are currently an inpatient. The AUTO REFILL job defaults to NO unless the site has this flagged as YES.
PROCESS AUTO REFILLS FOR CNH	This flag should be set to Yes, only if the site wants the scheduled AUTO REFILL [PSO AUTO REFILL] option to process refills for CNH patients. The AUTO REFILL job defaults to NO unless the site has this flagged as YES.

The following example displays all of the prompts that are possible with the *Site Parameter Enter/Edit* option. The prompts displayed at each site will depend upon that site's settings.

Example: Site Parameter Enter/Edit - all fields

```
Select Maintenance (Outpatient Pharmacy) Option: SITE Parameter Enter/Edit

Select SITE NAME: ALBANY 500

Would you like to see all site parameters for this division? Y// NO

NAME: ALBANY// <Enter>
MAILING FRANK STREET ADDRESS: 114 ANYSTREET AVE// <Enter>
AREA CODE: 555// <Enter>
PHONE NUMBER: 555-1234// <Enter>
MAILING FRANK ZIP+4 CODE: 55555// <Enter>
SITE NUMBER: 123// <Enter>
```

Example: Site Parameter Enter/Edit - all fields (continued)

```
NCPDP NUMBER: <Enter>
MAILING FRANK CITY: ANY CITY// <Enter>
MAILING FRANK STATE: ANY STATE// <Enter>
MAILING COMMENTS: <Enter>
INACTIVE DATE: <Enter>
HOLD FUNCTION?: NO// <Enter>
SUSPENSE FUNCTION?: YES// <Enter>
CANCEL DRUG IN SAME CLASS: YES// <Enter>
REFILL INACTIVE DRUG RXS: YES// <Enter>
ASK METHOD OF PICKUP: YES// <Enter>
PASS MEDS ON PROFILE: YES// <Enter>
PROFILE `SORT BY' DEFAULT: DATE// <Enter>
COPIES ON NEW: YES// <Enter>
DRUG CHECK FOR CLERK: YES// <Enter>
FEE BASIS SUPPORT: YES// <Enter>
MULTI RX REQUEST FORM: YES// <Enter>
BARCODES ON REQUEST FORMS: BOTH// <Enter>
BARCODES ON ACTION PROFILES: YES// <Enter>
VERIFICATION: YES// <Enter>
DISPLAY GROUP: OUTPATIENT// <Enter>
SCREEN PROFILES: YES// <Enter>
EDIT PATIENT DATA: YES// <Enter>
EDIT DRUG: YES// <Enter>
RENEWING RX'S ALLOWED: YES// <Enter>
PASS MEDS CANCEL: NO// <Enter>
AUTO SUSPEND: YES// <Enter>
SHALL COMPUTER ASSIGN RX #S: YES// <Enter>
PROFILE WITH NEW PRESCRIPTIONS: NO// <Enter>
SLAVED LABEL PRINTING: YES// <Enter>
METHADONE PROGRAM: NO// <Enter>
METHADONE DRUG: METHADONE SOLUTION (METHADOSE) // <Enter>
DAYS TO PULL FROM SUSPENSE: 2// <Enter>
DAYS TO PULL SUSPENDED CS CMOP: <Enter>
NEW LABEL STOCK: YES// <Enter>
EXTERNAL INTERFACE: SEND ALL ORDERS AND PRINT LABEL
         // <Enter>
Select DISPENSING SYSTEM PRINTER: <Enter>
BLANK LABEL BETWEEN PATIENTS: <Enter>
VERIFYING PHARMACIST ON LABELS: YES// <Enter>
AUTOMATED DISPENSE: HL7 V.2.4// <Enter>
FILE RELEASE DATE/TIME: YES// <Enter>
ENABLE MASTER FILE UPDATE: <Enter>
DISPENSE DNS NAME: <Enter>
DISPENSE DNS PORT: <Enter>
Select CPRS ORDERING INSTITUTION: TROY// <Enter>
  CPRS ORDERING INSTITUTION: TROY// <Enter>
  LOGICAL LINK: <Enter>
Select CPRS ORDERING INSTITUTION: <Enter>
RELATED INSTITUTION: ALBANY// <Enter>
NPI INSTITUTION: <Enter>
LABEL/PROFILE MONITOR MAX: 1000// <Enter>
NARCOTICS NUMBERED DIFFERENTLY: YES// <Enter>
NARCOTIC LOWER BOUND: 10000// <Enter>
NARCOTIC UPPER BOUND: 99999// <Enter>
PRESCRIPTION # LOWER BOUND: 100000999// <Enter>
PRESCRIPTION # UPPER BOUND: 500000000// <Enter>
IB SERVICE/SECTION: PHARMACY// <Enter>
```

Example: Site Parameter Enter/Edit - all fields (continued)

```
NARRATIVE FOR COPAY DOCUMENT: <Enter>
The copay narrative displays here.
 Edit? NO//
NARRATIVE REFILLABLE RX:
                                  The narrative for refillable RXs displays here.
*******************
 Edit? NO// <Enter>
NARRATIVE NON-REFILLABLE RX:. . .
The narrative for non-refillable RXs displays here.
 Edit? NO// <Enter>
LOGICAL LINK: <Enter>
PROCESS AUTO REFILLS FOR INPAT: NO// <Enter>
PROCESS AUTO REFILLS FOR CNH: NO// <Enter>
Outpatient System Parameters
DEFAULT OUTPATIENT SITE: JAN// <Enter>
ADMISSION CANCEL OF RXS: YES// <Enter>
Select EXEMPT WARD FROM AUTOCANCEL: NHCU// <Enter>
DAYS PRINTED RX STAYS IN 52.5: 7// <Enter>
POLYPHARMACY W/ACTION PROFILE: <Enter>
Currently 'INTERDIVISIONAL' processing 'is' allowed.
   Do you want to change this? : N// <Enter> 0
This question involves the following prompt:
'RX is from another division. Continue? (Y/N)'
Do you want this prompt to appear
whenever an action is attempted on the prescription: Y// <Enter> ES
Do you want all refill request forms to be processed
at a particular division?: Y// <Enter> ES
Choose REFILL division: Cindy// <Enter> 043
Initialization of 'INTERDIVISIONAL PROCESSING' is complete.
Select SITE NAME:
```

Edit Provider[PSO PROVIDER EDIT]

Edit existing provider entries in the NEW PERSON file with this option.

Add New Providers [PSO PROVIDER ADD]

This option allows new providers to be added. The provider's name is already in the file if the name entered at the "Enter NEW PERSON's name" prompt is repeated and the screen returns to the menu. The *Edit Provider* option must be used in this case to change existing provider entries.

Queue Background Jobs[PSO AUTOQUEUE JOBS]

This option is used to queue all background jobs. Once the *Queue the Background Jobs* option is selected, the option automatically pre-selects the jobs. Entering "E" for exit cannot exit the option. To exit a specific job and go on to the next one, an up arrow (^) must be entered. The background jobs are as follows:

- Autocancel Rx's on Admission
- Nightly Rx Cost Compile
- Nightly Management Data Compile
- Compile AMIS Data (NIGHT JOB)
- Expire Prescriptions
- Auto-delete from Suspense

A date and time at least two minutes in the future must be entered. The jobs should be set to run at a time convenient for the site.

Respond only to the following prompts. All others will be left blank.

QUEUED TO RUN AT WHAT TIME: This is the date/time desired for this option to be started

by TaskMan.

RESCHEDULING FREQUENCY: If this field is blank then the job will run only once.

Example: View of Queue Background Jobs Screen

```
Select Maintenance (Outpatient Pharmacy) Option: Queue Background Jobs

If time to run option is current do not edit.

Edit Option Schedule
Option Name: PSO AUTOCANCEL
Menu Text: Autocancel on Admission

QUEUED TO RUN AT WHAT TIME: JUN 27,2007@12:02

DEVICE FOR QUEUED JOB OUTPUT:
QUEUED TO RUN ON VOLUME SET:

RESCHEDULING FREQUENCY: 1D

TASK PARAMETERS:
SPECIAL QUEUEING:

COMMAND:

Press <PF1>H for help Insert
```

Autocancel Rx's on Admission[PSO AUTOCANCEL1]

Use the *Autocancel Rx's on Admission* option to task a job every night to cancel the outpatient prescriptions of patients who were admitted 3 days ago. Enter the time desired to queue the job to run. Using this same option the user can also edit the time set for the job to run. The job should be set to run at a time between 5:30 p.m. and 11:30 p.m. (or when convenient for the site).

Bingo Board Manager (BM) [PSO BINGO MANAGER]

Through the *Bingo Board Manager* menu the user can access the necessary options to set up the bingo board. Before data entry can begin, the division must be defined when entering the software package. Divisions are manager defined, but should be consistent with local policies in order to keep the statistical data relevant. At least one division must be defined.

After defining the division, define the display parameters through the *Enter/Edit Display* option. The display group is a uniquely defined location where the patient data will be displayed. As with the division parameter, at least one display group must be defined.

The following options are available on the Bingo Board Manager menu:

- Enter/Edit Display
- Auto-Start Enter/Edit
- Print Bingo Board Statistics
- Print Bingo Board Wait Time
- Purge Bingo Board Data
- Start Bingo Board Display
- Stop Bingo Board Display

Enter/Edit Display [PSO BINGO ENTER/EDIT DISPLAY]

Unique locations where the patient data will be displayed can be defined with this option. Enter a new display group name or the name of an existing group to edit or delete.

If the name is chosen at the "NAME/TICKET" prompt, the "TICKET #" prompt will not appear when a new patient is entered in the *Enter a New Patient* option.

The display cannot be changed from name to ticket when patients are already in the Group Display. All patients must be purged using the *Purge Bingo Board* option for that Group Display. After the data is purged, the user must edit the NAME/TICKET field using this option. Then the patient can be re-entered and assigned ticket numbers.



Only devices with the sub-type C-VT can be entered at the "DISPLAY DEVICE" prompt. A DEC VT-220 with a coaxial output connected to a cable ready TV monitor is all that is needed on the hardware side.

Example: Enter/Edit Display

```
Select Bingo Board Manager Option: Enter/Edit Display
Select GROUP DISPLAY NAME: MAIN
  Are you adding 'MAIN' as a new GROUP DISPLAY (the 3RD)? Y (Yes)
NAME: MAIN// < Enter> [The name of the Display Group.]
NAME/TICKET: NAME NAME [Select either Name or Ticket # to display.]
MESSAGE:
 1>WEST CLINIC VAMC
 2>[This is a free text field. The message will appear on the screen for the users to view.]
EDIT Option: <Enter>
TWO COLUMN DISPLAY: Y YES [Display names/ticket #'s in one or two column.]
DISPLAY WAIT TIME: Y YES [Average display waiting time.]
NORMAL WAIT TIME: 10 [Normal wait time (in minutes) is entered by the site.]
DISPLAY SETUP HELP TEXT: Y YES
In order to automatically start and stop the bingo board monitor,
a dedicated device must be setup by your IRM Service.
Once a dedicated device is setup, the bingo board can be scheduled
to automatically start and/or stop at user-defined times.
Enter 'NO' at the DISPLAY SETUP HELP TEXT prompt to not display this help text.
DISPLAY DEVICE: ? [Device dedicated by IRMS for bingo board setup.]
     Only devices with Sub-type starting with "C-VT" is allowed.
 Answer with DEVICE NAME, or LOCAL SYNONYM, or $1, or VOLUME SET(CPU), or
    SIGN-ON/SYSTEM DEVICE, or FORM CURRENTLY MOUNTED
DISPLAY DEVICE: [Select print device.]
AUTO-START DISPLAY DEVICE: Y YES [Sets the display group to automatically start.]
Do you want to initialize auto-start now? NO// Y YES
Enter Start Time: ?
Enter time as HH:MM in 12 hour format (For example, '8:00' or '8:00AM).
Enter Start Time: 9:30am [Start time for the display group.]
Enter Stop Time: 4:00pm [Stop time for the display group.]
```

At the "QUEUED TO RUN AT WHAT TIME" prompt a time must be entered that is at least two minutes in the future. The software will convert it to today's date with the time entered. For example, if the time is 8:00am, to queue it for later today 9:30am can be entered. It will default to today's date. To enter a time for it to queue tomorrow, "T+1@00:00am/pm" must be entered. For example, if the time is 3:00pm, to queue it for 8:30am, "T+1(or tomorrow's date)@8:30am" must be entered.

Auto-Start Enter/Edit [PSO BINGO INITIALIZE]

This option is used to change the start and stop times of the display groups that have been set up to automatically start and/or stop each day. The scheduling time and frequency can also be changed using this option.

Example: Auto-Start Enter/Edit

```
Select Bingo Board Manager Option: AUTO-Start Enter/Edit

You want to edit Display Group(s) Start/Stop times? NO// Y YES
Select GROUP DISPLAY NAME: MAIN
Enter Start Time: 3:00AM// <Enter>
Enter Stop Time: 4:00PM// <Enter>
Select GROUP DISPLAY NAME: <Enter>
```

See the *Enter/Edit Display* option for an example of the auto-start screen.]

Print Bingo Board Statistics [PSO BINGO REPORT PRINT]

A report is generated covering a date range that can be sorted by single division or all divisions. Date ranges in the future are not allowed. The start date must be a date that precedes the end date.

The Bingo Board Report includes totals on number of patients, waiting time, and average waiting time.

Print Bingo Board Wait Time [PSO BINGO REPORT WAIT TIME]

This option allows printing of a report that sorts the entries in the PATIENT NOTIFICATION (Rx READY) file by Display Group, then Wait Time. This report can be used to keep track of the bingo board activity for a given day. To keep a permanent record of this activity, this report can be printed each day, preferably at the end of the day. The following are definitions of the items found on this report.

Field	Description
Name	The name of the patient. For a patient with multiple entries, his/her name is printed only once.
Time In	The time that the patient's name was entered in the computer.
Time Out	The time that the patient's name was entered on the bingo board monitor.
Rx#	The prescription number.
Wait Time	The amount of time it took to fill the prescription. It is the difference between Time In and Time Out. For orders with more than one prescription, the wait time is the same for each.
Display	The Display Group that the entries were entered under. Multiple site hospitals may have multiple display groups set up to coincide with each site.
Total	A summation of all the Wait Times in the PATIENT NOTIFICATION (Rx READY) file. It includes the wait time of the patients with multiple entries. For example, if it took 3 minutes to fill each of the three prescriptions for OPPATIENT23,ONE, the Total function sums up the Wait Time as though it took 9 minutes.
Count	The number of Wait Time entries. It counts the number of wait time entries for each prescription, not each patient.
Mean	The average or middle value of the Wait Time range of values.
Minimum	The least Wait Time value in the range.
Maximum	The greatest Wait Time value in the range.
Dev. (Deviation)	A relative number which signifies the overall departure from the average.

Data may be lost if this report is not printed each day, because many sites purge the PATIENT NOTIFICATION (Rx READY) file each morning.

Example: Print Bingo Board Wait Time

Select Bingo Board Option: BM	r Bingo F	Roard Mana	ager	
beleet bingo board operon.	• Dingo i	Journ Ham	1901	
BINGO BOARD	CONTROL	PANEL		
Select Bingo Board Manager Op 1 Print Bingo Board St 2 Print Bingo Board Wa CHOOSE 1-2: 2 Print Bingo Bo DEVICE: [Select Print Device] report follows	atistics it Time pard Wait	Time		
BINGO BOARD WAIT TIME PRINTOU			MAY 21,1997 15:34	
NAME		TIME	Rx#	WAIT TIME
DISPLAY: WAITING ROOM OPPATIENT30,ONE	1503		2004342	1
	1503 1509	1504 1512	2004343 2004345 2004346	1 1 3
OPPATIENT14,ONE	1509	1512 1512	2004354	3 3
OPPATIENT5, ONE	1509	1512 1512 1512	2006376	3 3 3
OPPATIENT19, ONE		1527 1527	2002403 2006034	3 3
OPPATIENT26,ONE		1527 1527	2002365 2002573	3 3
TOTAL COUNT MEAN MINIMUM MAXIMUM DEV.				33 13 3 1 3

Purge Bingo Board Data [PSO BINGO PURGE]

With this option, the user can delete all entries from the PATIENT NOTIFICATION (Rx READY) file.



It is recommended that data be purged each day. However, if data is not purged, it will not affect the accuracy of the bingo board statistics.

IMPORTANT

If this option is used before the end of the workday, all data will be lost except the statistical data on those prescriptions already picked up.

Start Bingo Board Display [PSO BINGO START]

Use this option to start the bingo board display. If there are no prescription entries yet, the message typed in the GROUP DISPLAY will cycle. When the entries begin, the message will be displayed and held for a period of time, then pages of numbers or names will be displayed until all the names have been shown. Then the cycle starts over.

The terminal that executes the option may or may not be the display terminal.

Stop Bingo Board Display [PSO BINGO STOP]

Use this option to stop the bingo board display. The bingo board can be stopped and started as often as desired. It must be stopped if any changes are made to the display group currently being used. This option can be accessed from any terminal.

When the display is stopped and "Yes" answered to the purge prompt, a second prompt appears and allows all of the display groups or a specific display group to be selected for purging.

Edit Data for a Patient in the Clozapine Program [PSOL EDIT]

Use this option to edit data for a patient who has already been enrolled in the Clozapine treatment program. It is typically used to re-register a patient whose treatment has been discontinued and who has rejoined the program.

There are two statuses, Pre-Treatment and Active Treatment, which can be selected. Two other statuses, Treatment on Hold and Discontinued, are set by the background job and require the patient to be reregistered.

The Pre-Treatment status is for a patient registered but never receiving a prescription. If after four weeks (28 days prior to the start date listed for the data collection) the patient does not receive a prescription, the patient status is changed to Discontinued by the background job and the patient must be re-registered.

The Active status is for a patient that has had a prescription within the last 7 or 14 days. If the most recent prescription is over 14 days old, the patient status is changed to Treatment on Hold by the background job and the patient must be re-registered.



Sex, race, and ZIP Code should be registered for each patient through Medical Administration Service (MAS) or the Business Management Office.

Enter/Edit Clinic Sort Groups [PSO SETUP CLINIC GROUPS]

This option enables a group of clinics to be identified that will print together for the action/informational profiles.

Example: Enter Clinic Sort Group

```
Select Maintenance (Outpatient Pharmacy) Option: ENT
        Enter/Edit Clinic Sort Groups
        Enter/Edit Local Drug Interaction
CHOOSE 1-2: 1 Enter/Edit Clinic Sort Groups
Select Clinic Sort Group: ?
Answer with OUTPATIENT CLINIC SORT GROUP NAME
Choose from:
  CLINIC 1
  Clinic 2
     You may enter a new OUTPATIENT CLINIC SORT GROUP, if you wish
    Answer must be 3-30 characters in length.
Select Clinic Sort Group: CLINIC 3
 Are you adding 'CLINIC 3' as
   a new OUTPATIENT CLINIC SORT GROUP (the 6TH)? Y (Yes)
NAME: Clinic 1// <Enter>
Select SORT GROUPS: ?
Answer with SORT GROUP SORT GROUPS
    You may enter a new SORT GROUP, if you wish
    Enter name of clinic to be included in the sort group.
Answer with HOSPITAL LOCATION NAME, or ABBREVIATION
Do you want the entire 122-Entry HOSPITAL LOCATION List? {\bf N}
Select SORT GROUPS: 2 EAST
 Are you adding '2 EAST' as a new SORT GROUP (the 1ST for this OUTPATIENT
CLINIC SORT GROUP)? Y (Yes)
Select SORT GROUPS: < Enter>
```

Initialize Rx Cost Statistics [PSO COSTINIT]

This option allows the manager to initialize the system to automatically compile cost data for one day or a range of days.



Note: The default date is today plus 1 at 1:00 a.m. (T+1@01:00). The date on the screen represents either a default date/time if the option has never been queued, or the current date/time this option is queued to run.

Edit Pharmacy Intervention[PSO INTERVENTION EDIT]

Use this option to edit an already existing entry in the APSP INTERVENTION file.

Delete Intervention[PSO INTERVENTION DELETE]

This option can be used to delete an intervention from the APSP INTERVENTION file. An intervention can be deleted only on the same day that it was entered.

Auto-delete from Suspense [PSO PNDEL]

The *Auto-delete from Suspense* option is the same option as the V. 6.0 *Delete from Suspense File* option. This option allows the user to delete from the file the records of all the prescriptions that have already been printed prior to the user specified number of days. This specified number of days must be set from 7 to 90 days at the "DAYS PRINTED RX STAYS IN 52.5" prompt in the *Site Parameter Enter/Edit* option. The task is set to run every 7 days at the user specified time. The user may also re-queue or dequeue this task using this option. Once a prescription is deleted from suspense, it cannot be reset for reprinting. This option will delete based on the date the prescription was printed from suspense, not the original suspense date. The reason for using the print date is that one batch may print on a certain day with prescriptions with different original suspense dates. This job will therefore never delete only part of a printed batch.

Automate Internet Refill[PSO AUTO REFILL INITIALIZE]

This option initializes a job that will automatically process the refill requests placed via the Internet.



This option requires the PSOAUTRF key.

The following warning is displayed if the user does not hold the key.

Example: Automate Internet Refills – no security key held

Select Maintenance (Outpatient Pharmacy) Option: **AUTOMATE** Internet Refill You must hold the PSOAUTRF key to run this option!

Internet refills are processed for all active divisions defined in the OUTPATIENT SITE file that have pending refill entries in the PRESCRIPTION REFILL REQUEST file. The *Automate Internet Refill* option uses the same criteria (prompting) that is used for the *Process Internet Refill* option. However, instead of the user responding to the prompts, the criteria is automatically set up by the software as follows:

Prompt/Criteria	Pre-set Value
FILL DATE:	TODAY
MAIL/WINDOW:	MAIL
Will these refills be Queued or Suspended?	SUSPENDED
PROCESS AUTO REFILLS FOR INPAT?	NO (but site parameter overrides)
PROCESS AUTO REFILLS FOR CNH?	NO (but site parameter overrides)

Scheduling the background job includes setting a time and the job's rescheduling frequency.



These fields should be left blank: DEVICE FOR QUEUED JOB OUTPUT, QUEUED TO RUN ON VOLUME SET, TASK PARAMETERS, and SPECIAL QUEUEING.

Example: Automate Internet Refills - Setting up the background job

```
Edit Option Schedule
Option Name: PSO AUTO REFILL
Menu Text: Automate Internet Refill

QUEUED TO RUN AT WHAT TIME: AUG 7,2007@16:40

DEVICE FOR QUEUED JOB OUTPUT:

QUEUED TO RUN ON VOLUME SET:

RESCHEDULING FREQUENCY: 24H
TASK PARAMETERS:

SPECIAL QUEUEING:
```

Delete a Prescription [PSORXDL]

Using this option a prescription status can be changed to deleted. Deleted prescriptions do not appear on any profiles.



A released prescription can only be deleted after it has been returned to stock.

Expire Prescriptions[PSO EXPIRE INITIALIZE]

This option initializes a daily job that will mark any prescription as expired that has yesterday as an expiration date.

Manual Auto Expire Rxs

[PSO MANUAL AUTO EXPIRE]

This job needs to be run only if expired prescriptions are showing up as active orders on the Orders tab in CPRS. This could happen if the *Expire Prescriptions* option was not queued as a daily task *AND* those prescription(s) were never accessed/viewed in *Patient Prescription Processing* option.

Sites that have not queued the Expire Prescriptions job on the daily task schedule should do so by selecting the *Queue Background Jobs* option from the Maintenance (Outpatient Pharmacy) menu option, making an entry in the Edit Option Schedule template for the *Expire Prescriptions* option and scheduling it to run daily.

Prescription Cost Update

[PSO RXCOST UPDATE]

This option updates prescription costs in the DRUG COST file by generic drug name. Costs can be updated on refills and partials as well. Updates can be made only as far back as one year plus 120 days.

Purge Drug Cost Data [PSO PURGE DRUG COST]

To purge drug cost data from the DRUG COST file, enter a starting and ending date. Then choose to run this job immediately or queue it.

Example: Purge Drug Cost Data

```
Select Maintenance (Outpatient Pharmacy) Option: PURGE Drug Cost Data

Purge Cost Data Starting: FEB 2007// <Enter> (FEB 2007)

Purge Cost Data Ending: 3/97 (MAR 2007)

Are you sure you want to purge cost data
from 02/00/07 to 03/00/07? NO// Y YES

Do you want this option to run IMMEDIATELY or QUEUED? Q// <Enter> UEUED
Requested Start Time: NOW// <Enter> (MAY 06, 2007@10:31:23)
Task #223079 QUEUED.
```

Purge External Batches

[PSO INTERFACE PURGE]

This option purges entries from the PHARMACY EXTERNAL INTERFACE file.

Example: Purge External Batches

```
Select External Interface Menu Option: Purge External Batches
Enter cutoff date for purge of External Interface file: 022807 (FEB 28, 2007)

Purge entries that were not successfully processed? NO// <Enter>

Purge queued to run in background.

Select External Interface Menu Option: <Enter>
```

Recompile AMIS Data [PSO AMIS RECOMPILE]

To gather Automated Management Information System (AMIS) data from various sources, use this option. It is recommended that this job should be queued to run during off-peak hours (or at a time that is convenient for the site).



The month/day/year may be specified for a current month report, but only month and year can be specified for reports of past months.

Chapter 15: Using the Medication Profile

This chapter describes the Medication Profile, its different formats, and how it can be used in patient care.

Medication Profile

[PSO P]

The Medication Profile displays a profile of all prescriptions on file for a particular patient. The prescription display includes all Non-VA Med orders also. The user may view this information directly on the screen or request it to be printed. The medication profile is available in two formats: short or long.

Medication Profile: Short Format

The short format displays the following information:

- patient nameeligibilityreactions
- prescription number
- Sigquantitylast fill date
- address

- DOB
- narrative
- prescriptions
- drug name
- Status
- issue date
- refills remaining.

The short report format of the fields for Non-VA Med orders include the drug name or orderable item name, dosage, schedule and date documented.

The short format displays the status in an abbreviated form. The following is an explanation of the codes:

Code	Status/Description
A	Active
В	Bad Address Indicated
DC	Discontinued
E	Expired
Н	Hold
N	Non Verified
P	Pending due to drug interactions
S	Suspended
\$	Copay eligible
E	third-party electronically billable
R	Returned to stock prescription (next to last fill date)
H N P S \$ E	Hold Non Verified Pending due to drug interactions Suspended Copay eligible third-party electronically billable

Example: Medication Profile – Short Format

Select PATIENT NAME: OPPATIENT, THREE 3-5-9 000006578 NO
NSC
VETERAN OPPATIENT, THREE
WARNING: ** This patient has been flagged with a Bad Address Indicator.
LONG or SHORT: SHORT// SHORT
Sort by DATE, CLASS or MEDICATION: DATE// <Enter>
All Medications or Selection (A/S): All// <Enter>
DEVICE: HOME// [Select Print Device] GENERIC INCOMING TELNET

OPPATIENT, THREE 321 PECAN STREET DOB: DEC 29,1968 TESTING 2 ANYTOWN PHONE: 5554325455 ELIG: SC LESS THAN 50% TEXAS 12345 SC%: 40 CANNOT USE SAFETY CAPS. WEIGHT (Kg): HEIGHT (cm): DISABILITIES: ALLERGIES: ADVERSE REACTIONS: Enter RETURN to continue or '^' to exit: <Enter>

Outpatient prescriptions are discontinued 72 hours after admission Medication Profile Sorted by ISSUE DATE Rx# Drug ST REM Issued Last Fill _____ A 5 10-17-06 10-17-06 300486 ACE BANDAGE 4 INCH QTY: 1 SIG: USE LOOSELY ON AFFECTED AREA AS NEEDED \$100002342 AMOXICILLIN 250MG CAP A 3 10-10-6A 3 10-10-06 10-10-06 QTY: 15 SIG: TAKE ONE CAPSULE BY BY MOUTH QAM\QPM\Q4D&Q6D~Q12D TAKE ONE | EVERY | TWO ~ THREE & FOUR \ FIVE \TAB DC 3 10-10-06 10-10-06 \$100002343 SIMETHICONE 40MG TAB SIG: CHEW ONE TABLET BY BY MOUTH QAM\QPM!Q4D&Q6D~Q12D QTY: 15 TAKE ONE | | EVERY | TWO ~~THREE ~ AND &&FOUR&HHHH \\ FIVE \TAB

Medication Profile: Long Format

The long format displays all information contained on the short format as well as the following additional fields:

- physician's name
- fill date
- dates of refills/partial fills
- whether the prescription was filled at the pharmacy window or by mail
- clerk code
- total allowable refills
- which division filled it

The long report format of the fields for Non-VA Med orders include the start date, CPRS order #, status, documented by, order check(s), override reason, override provider, and statement of explanation.

Example: Medication Profile – Long Format

```
Select PATIENT NAME:
                      OPPATIENT, ONE 8-5-19 666000777 NO
                                                                          NSC
VETERAN OPPATIENT, ONE
WARNING: ** This patient has been flagged with a Bad Address Indicator.
LONG or SHORT: SHORT// LONG
Sort by DATE, CLASS or MEDICATION: DATE// <Enter>
All Medications or Selection (A/S): All// <Enter>
DEVICE: HOME// [Select Print Device] GENERIC INCOMING TELNET
    (TEMP ADDRESS from AUG 28,2006 till (no end date))
LINE1
                                     DOB: AUG 5,1919
ANYTOWN
                                      PHONE: 555-1212
TEXAS 77379
                                      ELIG: NSC
CANNOT USE SAFETY CAPS.
WEIGHT (Kg):
                                       HEIGHT (cm):
DISABILITIES:
ALLERGIES:
ADVERSE REACTIONS:
Enter RETURN to continue or '^' to exit: <Enter>
Outpatient prescriptions are discontinued 72 hours after admission
```

```
Medication Profile Sorted by ISSUE DATE

Rx #: 100001968Ae Drug: LOPERAMIDE 2MG CAP
SIG: TAKE TWO CAPSULES BY MOUTH EVERY DAY
QTY: 60 # of Refills: 5 Issue/Expr: 12-15-05/06-16-06
Prov: OPPROVIDER16,TWO Entry By: 10000000013 Filled: 01-14-06 (M)
Last Released: Original Release:
Refilled: 02-19-04 (M) Released:
Remarks:
Division: ALBANY (500) Active 4 Refills Left
```

Example: Medication Profile – Long Format (continued)

```
Non-VA MEDS (Not Dispensed by VA)

GINKO BILLOBA TAB

Dosage: 1 TABLET

Schedule: ONCE A DAY

Route: MOUTH

Status: Discontinued (10/08/03)

Start Date: 09/03/03 CPRS Order #: 12232

Documented By: OPCLERK21, FOUR on 09/03/03

Statement of Explanation: Non-VA medication not recommended by VA provider.
```

Medication Reconciliation

The Medication Reconciliation product (patch PSO*7*294) introduces the components necessary to build four tools useful for medication reconciliation. The product utilizes Health Summary components and Text Integrated Utility (TIU) data objects to create a list of current medications. Medication Reconciliation also leverages the Remote Data Interoperability (RDI) software to include medication data from other sites.

For a complete list of functionality, please refer to the Medication Reconciliation Implementation Guide.

Chapter 16: About the Output Reports Menu

This chapter describes the options on the *Output Reports* menu.

Output Reports

[PSO OUTPUTS]

The *Output Reports* menu generates a variety of management reports. These reports contain current medication profiles, utilization, cost, and workload information that help management maintain the highest level of patient care.

The following reports and menus are available on the *Output Reports* menu:

- Action Profile (132 COLUMN PRINTOUT)
- Alpha Drug List and Synonyms
- AMIS Report
- Bad Address Reporting Main Menu ...
- CMOP Controlled Substance Rx Dispense Report
- Commonly Dispensed Drugs
- Cost Analysis Reports ...
- Daily AMIS Report
- Drug List By Synonym
- Free Text Dosage Report
- Inactive Drug List
- Internet Refill Report
- List of Patients/Prescriptions for Recall Notice
- List Prescriptions on Hold
- Management Reports Menu ...
- Medication Profile
- Monthly Drug Cost
- Narcotic Prescription List
- Non-Formulary List
- Non-VA Meds Usage Report
- Poly Pharmacy Report
- Prescription List for Drug Warnings
- Released and Unreleased Prescription Report

Action Profile (132 COLUMN PRINTOUT) [PSO ACTION PROFILE]

This option provides a list of a patient's active prescriptions, the expired and canceled prescriptions that may be renewed, and any Non-VA Med orders documented via the CPRS GUI application, and any remote prescriptions the patient may have are added to the end of the list as shown in the following report. Each prescription is followed by a place for the provider to indicate the action, renew or discontinue. This profile can be printed for an individual patient, for all patients with appointments in a clinic, all patients in all clinics, or for a clinic group.

In addition, a polypharmacy report can be printed with the action/informational profile. To get this report, answer **Yes** to the "POLYPHARMACY W/ACTION PROFILE" prompt in the *Site Parameter Enter/Edit* option to turn on this site parameter. This profile can be printed in an 80- or 132-column format. The Action Profile must be sent to a printer.

Barcodes may not show up on the action profile if the site parameters have not been set up for them.

If a prescription is for a drug marked for lab monitoring, the most recent lab result will be printed.

Copay affects the output report for this option. The letters SC (service connected) and NSC (non-service connected) will print on the same line as the RENEW/MD line only if the veteran is rated service connected less than 50% and the prescription is not a supply item. This allows the physician to indicate (circle) the correct veteran eligibility so that the veteran may be charged a copay for the prescription, if applicable.

This report now displays **BAD ADDRESS INDICATED** if the patient has a bad address indicator. Also, if a temporary address has no end date, the following text is now displayed: "(Temp address from XXX 99,9999 till (no end date))".



If the prescription has been returned to stock, the letter (R) will appear next to the last fill date.

Example: Action Profile Report

```
Select Output Reports Option: action Profile (132 COLUMN PRINTOUT)
Action or Informational (A or I): A// I Informational
By Patient, Clinic or Clinic Group (P/C/G): P// <Enter> atient
Do you want this Profile to print in 80 column or 132 column: 132// <Enter>
Select PATIENT NAME: OPPATIENT, TEN OPPATIENT, TEN SC VETERAN

Profile Expiration/Discontinued Cutoff: (0-9999): 120// <Enter>
DEVICE: [Select Print Device] GENERIC INCOMING TELNET
```

```
Run Date: JUL 11,2007 Page: 1
Informational Rx Profile
Sorted by drug classification for Rx's currently active and for those Rx's that have been inactive less than 120 days.
Site: VAMC ALBANY (500)
Name : OPPATIENT, TEN
DOB : APR 4,1944 Address : 4 ANYSTREET DR.
                        ANYCITY, NEW YORK 12345
                       Phone : 723-5678
WEIGHT (Kg):
                                HEIGHT (cm):
DISABILITIES:
ALLERGIES: ASPIRIN-DRUG, METRONIDAZOLE 250MG TAB, METRONIDAZOLE PWDR, PENICILLIN
ADVERSE REACTIONS:
Medication/Supply
                                                               Rx#
    Status Expiration Provider
                 Date
Classification: CN101 - OPIOID ANALGESICS
ACETAMINOPHEN AND CODEINE 30MG Qty: 40 for 31 Days 100003
273 Active 07-16-2007 OPPROVIDER, ONE
              COSIGNER: OPPROVIDER, FOUR
       Sig: TAKE 2 TABLETS BY BY MOUTH EVERY SU FOR 10 DAYS WITH FOOD
       Filled: 06-15-2007 Past Fills: 06-15-2007
        Remaining Refills: 0 Clinic: INFIRMARY
                   Price: $1.48
     -----PENDING ORDERS-------
Drug: ASPIRIN BUFFERED 325MG TAB
Eff. Date: 10-04-2000Qty: 10 Refills: 3 Prov: OPPROVIDER, ONE
Sig: TAKE 1 CAP, ORAL BY BY MOUTH TWICE A DAY
Drug: HYDROCHLOROTHIAZIDE 50MG
Eff. Date: 10-04-2000Qty: 10 Refills: 3 Prov: OPPROVIDER, ONE
Sig: TAKE 2 TAB BY BY MOUTH TWICE A DAY
```

MEDICATION PROFILE FROM OTHER VAMC(s) Page: 2 Date Printed: 12/22/2008				
Patient: OPPATIENT, TEN		DOB: 04	/04/1944	
RX #	DRUG S	T QTY	ISSUED	LAST FILLED
HDR CHEYENNE				
712885	AMOXICILLIN TRIHYDRATE 250MG CAP A SIG: TAKE ONE CAPSULE BY MOUTH THREE PROVIDER: PSOPROVIDER, ONE			11/06/08
712886	DILTIAZEM (INWOOD) 240MG CAP, SA A SIG: TAKE ONE CAPSULE BY MOUTH EVERY PROVIDER: PSOPROVIDER, ONE		11/28/08	11/28/08
712887	SIMVASTATIN 20MG TAB SIG: TAKE ONE-HALF TABLET BY MOUTH E FOR PATTESTING FOR PATIENT TEST FOR PATIENTENT INTRUCT ION ON S PATIENT INTRUCTION ON SIG1 TEST REPLACE IENT WITH IENT TESTING INTRUCTION ON SIG1 TESTING FOR PROVIDER: PSOPROVIDER, ONE	VERY EVING FOR FOR PA	VENING TES R PATTESTI STING FOR R PATIENT	TING

Example: Action Profile with the Polypharmacy Report

```
Select Outpatient Pharmacy Manager Option: Output Reports
Select Output Reports Option: Action Profile (132 COLUMN PRINTOUT)
Action or Informational (A or I): A// <Enter> Action
Do you want generate a Polypharmacy report?: NO// YES
Minimum Number of Active Prescriptions: (1-100): 7// <Enter>
By Patient, Clinic or Clinic Group (P/C/G): P// ?
Enter 'P' to print by patient
      'C' for printing by clinic
      'G' for printing by clinic group
      'E' to exit process
     Select one of the following:
                   Patient
                   Clinic
                   Clinic Group
                   Exit
By Patient, Clinic or Clinic Group (P/C/G): P// G Clinic Group
Select Clinic Sort Group: WEST CLINIC
FOR DATE: 021007 (FEB 10, 2007)
Profile Expiration/Discontinued Cutoff: (0-9999): 120// <Enter>
Select a Printer: [Select Print Device]
DO YOU WANT YOUR OUTPUT QUEUED? NO// <Enter> (NO)
Select Clinic Sort Group: < Enter>
```

Alpha Drug List and Synonyms [PSO ALPHA]

This report lists all drugs in alphabetical order by generic name. Any existing synonyms for each drug are listed in lowercase letters under the generic name.

AMIS Report

[PSO AMIS]

This report lists prescription statistics that are required by the VA Central Office. For a multidivisional site, the print device will report each division's statistics on a separate page with the grand totals on the last page. This report must be printed on a 132-column printer.



Month/day/year may be specified for a current month report, but only month and year can be specified for reports of past months.

Bad Address Reporting Main Menu [PSO BAI REPORT]

The Bad Address Reporting Main Menu provides the following options:

- Bad Address Suspended List
- List Prescriptions Not Mailed

Bad Address Suspended List[PSO BAI SUSPENDED]

This option identifies prescriptions for veterans with either Bad Address Indicated, Do Not Mail, for Foreign Address, as well as no active temporary address, giving the user the opportunity to be proactive regarding prescriptions that when Printed or Pulled Early from Suspense, would be unable to be mailed.

Example: Bad Address Suspended List Report

```
Select Output Reports Option: Bad Address Reporting Main Menu
Select Bad Address Reporting Main Menu Option: Bad Address Suspended List
This option shows unprinted suspended prescriptions for the following:
- BAD ADDRESS INDICATOR set in the PATIENT file (#2) and no active temporary
- DO NOT MAIL set in the PHARMACY PATIENT file (#55)
- FOREIGN ADDRESS set in the PATIENT file (#2) and no active US temporary
     Select one of the following:
                   Bad Address Indicator
                   Do Not Mail
                   Foreign
                   All
Print for Bad Address Indicator/Do Not Mail/Foreign/All (B/D/F/A): A// <Enter>
Ending suspense date: 08.15.07 (AUG 15, 2007)
   You are logged in under the ALBANY division.
Print only those Rx's suspended for this division? Yes// <Enter> YES
DEVICE: HOME// [Select Print Device]
```

Example: Bad Address Suspended List Report (continued)

```
Suspense BAI/DO NOT MAIL/FOREIGN ADRESS report - division = ALBANY PAGE: 1 for suspense dates through AUG 15, 2007 B/D/F

OPPATIENT, NINETYFIVE (00-6666)
AUG 13, 2007 Rx#: 100002466 AMOXICILLIN 250MG CAP D

OPPATIENT, SEVEN (00-0175)
JUL 02, 2007 Rx#: 100002097 PLACEBO TAB B

NOTE: B=BAD ADDRESS INDICATOR D=NO NOT MAIL F=FOREIGN ADDRESS

End of Report.
Press Return to continue:
```

List Prescriptions Not Mailed [PSO BAI NOT MAILED]

This option provides a report of prescriptions with a routing of Mail that were not mailed due to a bad address.

CMOP Controlled Substance Rx Dispense Report[PSO CMOP CS RX DISPENSE REPORT]

This report provides a log of controlled substance prescriptions dispensed by a CMOP. This report can be sorted by release date or alphabetically by drug name. It displays the Release Date, Patient Name, Prescription Number, CMOP Status, and CMOP facility at which the prescription was filled. This report is designed to print on a 132-column printer and it is recommended that the printing be queued.

Commonly Dispensed Drugs[PSO COMMON]

This report lists the drugs with the greatest number of fills during a selected period of time. For multidivisional sites, the print device will report each division's statistics on a separate page.

Cost Analysis Reports

[PSO COMMON]

This menu contains twelve different reports of cost analysis using existing data. Data for these reports are already compiled, so they print relatively quickly.

Clinic Costs

[PSO CLINIC COSTS]

This report contains data on all the prescriptions filled during the user specified time period for a specific clinic or for clinics.

Division Costs by Drug [PSO DIV COSTS BY DRUG]

This report contains data on all prescriptions filled during a user specified period of time for one or more pharmacy divisions at a single site.

Drug Costs

[PSO DRUG COSTS]

This report contains data on all prescriptions filled during a user specified time period for a specific drug or all drugs on file.

Drug Costs by Division[PSO COST BY DIVISION]

This report contains data on all prescriptions filled during a user specified period of time at a specific pharmacy division or for all pharmacy divisions.

Drug Costs by Division by Provider [PSO COST DIVISION BY PROVIDER]

This report contains drug costs during a user specified period of time sorted by division or divisions and within the division by provider.

Drug Costs by Provider [PSO COST BY PROVIDER]

This report contains data on all prescriptions filled during a specified period of time sorted by a drug or all drugs for each provider.

High Cost Rx Report [PSO HI COST]

This report lists all prescriptions filled during the specified time period that cost more than the user specified dollar limit.

Patient Status Costs

[PSO COST BY PATIENT STATUS]

This report displays data on all prescriptions filled during a user specified period of time for a specific patient status.

Pharmacy Cost Statistics Menu

[PSO COST STAT MENU]

This menu contains options for pharmacy cost statistics data.

Pharmacy Statistics

[PSO COST STATISTICS]

This report contains cost information and other statistics for all prescriptions filled during a user specified period of time.

Sort Statistics By Division

[PSO COST STATS BY DIVISION]

This report sorted by division contains cost information and other statistics for all prescriptions filled during a user specified period of time.

Provider by Drug Costs

[PSO COST PROVIDER BY DRUG]

This report sorted by provider displays data on all prescriptions filled for each drug during a user specified period of time.

Provider Costs

[PSO COST PER PROVIDER]

This report displays the total prescription and cost data for prescriptions sorted by provider for a user specified period of time.

Request Statistics

[PSO REQ STATS]

This report displays the total number of requests for service, average cost for each request, and average number of fills per request for a user specified period of time.

Daily AMIS Report

[PSO DAILY AMIS]

This report contains Automated Management Information System (AMIS) data for a selected day, month, and quarter. Output includes daily, monthly, and quarter AMIS totals.

Drug List By Synonym [PSO SYNONYM]

This report lists all active drugs in alphabetical order by synonym. The drug is listed once for each synonym.

Free Text Dosage Report

[PSO DOSAGE REPORT]

This report provides a list of drugs for prescriptions having a Dosage Ordered entry that is free text or a dosage that results in the calculation of the number of tablets. This report is designed to help identify all such entries so that sites can determine if these dosages should be added to the Local Possible Dosages in the DRUG file, which would make them selectable during the medication order entry process.

Example: Free Text Dosage Report

Run Date: NOV 13,2006 Free Text Dosage Ent for the Period: APR 27,20		Page 1
Drug Provider:Count	Free Text Entry	Count
ACETAMINOPHEN AND CODEINE 30MG (342) OPPROVIDER24, TWO: 3	3 TABLETS	3
ALCOHOL PREP PADS (3718) OPPROVIDER13, TWO:2	1 PAD	2
OPPROVIDER13, TWO:1	PAD	1
AMINOPHYLLINE 500MG SUPP (3422) OPPROVIDER13, TWO:1	1 SUPPOSITORY(IES) 500MG	1
ASPIRIN BUFFERED 325MG TAB (280) OPPROVIDER24,TWO:2	1625MG	2
OPPROVIDER24, TWO:2 OPPROVIDER13, TWO:	975MG :1	3

Inactive Drug List [PSO INACTIVE]

This report lists those drugs on file that have been inactivated.

VA FileMan sorts this report. If the user does not have VA FileMan experience, it is strongly recommended that the local IRMS staff be contacted before running this report.

96

Internet Refill Report

[PSO INTERNET REFILL REPORT]

This option generates a list of all Internet Refill prescriptions sorted by Patient, Date, or Result for one division or for all. This report can be printed in detail or summary format.

Example: Internet Refill Report - Detailed report, sorted by patient

```
Select Output Reports Option: Internet Refill Report
You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.
DIVISION: ALBANY 500
                          ALBANY
ANOTHER ONE: <Enter>
Beginning Date: 06.27.07 (JUN 27, 2007)
Ending Date: 08.16.07 (AUG 16, 2007)
    Select one of the following:
            Patient
Date
                  Result
Sort by Patient/Date/Result (P/D/R): R// Patient
    Select one of the following:
               Detail
Summary
Print Detail/Summary report (D/S): S// Detail
Do you want this report to print in 80 or 132 column format: 80// <Enter>
DEVICE: HOME// [Select Print Device]
              ------example continues-----
```

Example: Internet Refill Report – Detailed report, sorted by patient (continued)

```
INTERNET REFILL REPORT BY PATIENT - Detail
                                          AUG 16,2007 15:29:56 PAGE: 1
Not Filled - For date range JUN 27, 2007 through AUG 16, 2007 for ALBANY
Patient
                           Rx #
                                      Date
                   Reason
OPPATIENT, ELEVEN (0359) 100002461 08/10/07
                   Patient Died on AUG 10, 2007
                           100002461 08/21/07
    Total transactions for patient = 1
OPPATIENT, NINETEEN (0000) 10064
                                      07/26/07
                   Cannot refill Rx # 10064 Rx is in DISCONTINUED status
                          100002419 07/20/07
                   Cannot refill Rx # 100002419
                           100002421 08/02/07
                   Cannot refill Rx # 100002421
                   100002422 08/03/07
Cannot refill Rx # 100002422
    Total transactions for patient = 4
OPPATIENT, FOUR (0358)
                                      07/26/07
                       10065
                  Cannot refill Rx # 10065 Narcotic Drug
    Total transactions for patient = 1
OPPATIENT, ONE (0285) 100002435
                                      07/30/07
                  Cannot refill Rx # 100002435
     Total transactions for patient = 1
OPPATIENT, SEVEN (0117) 100002432 07/30/07
                  Cannot refill Rx # 100002432
    Total transactions for patient = 1
OPPATIENT, TWO (0270) 100002424 07/26/07
                   Cannot refill Rx # 100002424
     Total transactions for patient = 1
Total transactions for date range JUN 27, 2007 through AUG 16, 2007 = 9
Press Return to continue: <Enter>
** END OF REPORT **
```

Example: Internet Refill Report – Summary report, sorted by patient

```
Select Output Reports Option: Internet Refill Report
You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.
DIVISION:
            ALBANY 500
                           ALBANY
ANOTHER ONE: <Enter>
Beginning Date: 06.27.07 (JUN 27, 2007)
Ending Date: 08.16.07 (AUG 16, 2007)
     Select one of the following:
                  Patient
         D
                   Date
                   Result
Sort by Patient/Date/Result (P/D/R): R// Patient
     Select one of the following:
                  Detail
                  Summary
Print Detail/Summary report (D/S): S// Summary
DEVICE: HOME// [Select Print Device]
```

INTERNET REFILL REPORT BY PATIENT - Summary AUG 16,2007 15:30:26 PAGE: 1
For date range JUN 27, 2007 through AUG 16, 2007 for ALBANY

Patient Filled Not Filled Total

OPPATIENT, ELEVEN (0359) 0 1 1 1 0
OPPATIENT, NINETEEN (0000) 2 4 6 0
OPPATIENT, FOUR (0358) 0 1 1 1 0
OPPATIENT, ONE (0285) 1 1 2
SURPATIENT, EIGHTYFIVE (0356) 1 0 1
OPPATIENT, SEVEN (0117) 0 1 1
OPPATIENT, TWO (0270) 0 1 1

COUNT: 4 9 13

Press Return to continue: <Enter>

** END OF REPORT **

Example: Internet Refill Report - Detailed report, sorted by date

```
Select Output Reports Option: Internet Refill Report
You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.
            ALBANY 500
DIVISION:
                           ALBANY
ANOTHER ONE: <Enter>
Beginning Date: 06.27.07 (JUN 27, 2007)
Ending Date: 08.16.07 (AUG 16, 2007)
    Select one of the following:
         Ρ
                   Patient
         D
                   Date
         R
                   Result
Sort by Patient/Date/Result (P/D/R): R// Date
    Select one of the following:
                  Detail
                  Summary
Print Detail/Summary report (D/S): S// Detail
Do you want this report to print in 80 or 132 column format: 80// <Enter>
DEVICE: HOME// [Select Print Device]
```

```
INTERNET REFILL BY DATE - Detail AUG 16,2007@15:30
Not Filled - For date range JUN 27, 2007 through AUG 16, 2007 for ALBANY
Patient
                        Rx # Date
                 Reason
JUL 20, 2007
OPPATIENT, NINETEEN (0000) 100002419
                 Cannot refill Rx # 100002419
Count: 1
JUL 26, 2007
OPPATIENT, TWO (0270) 100002424
                 Cannot refill Rx # 100002424
OPPATIENT, FOUR (0358) 10065
                 Cannot refill Rx # 10065 Narcotic Drug
OPPATIENT, NINETEEN (0000) 10064
                 Cannot refill Rx # 10064 Rx is in DISCONTINUED status
Count: 3
JUL 30, 2007
OPPATIENT, SEVEN (0117)
                          100002432
                Cannot refill Rx # 100002432
OPPATIENT, ONE (0285) 100002435
                 Cannot refill Rx # 100002435
Count: 2
```

-----example continues-----

Example: Internet Refill Report – Detailed report, sorted by date (continued)

```
AUG 02, 2007

Press Return to continue, '^' to exit: <Enter>
```

```
INTERNET REFILL BY DATE - Detail AUG 16,2007@15:30
                                                                PAGE: 2
Not Filled - For date range JUN 27, 2007 through AUG 16, 2007 for ALBANY
                           RX # RESULT/REASON
Patient
OPPATIENT, NINETEEN (0000) 100002421 Cannot refill Rx # 100002421
                  Cannot refill Rx # 100002421
Count: 1
AUG 03, 2007
OPPATIENT, NINETEEN (0000) 100002422 Cannot refill Rx # 100002422
                  Cannot refill Rx # 100002422
AUG 10, 2007
OPPATIENT, ELEVEN (0359) 100002461 Patient Died on AUG 10, 2007
Count: 1
Total transactions for date range JUN 27, 2007 through AUG 16, 2007 = 9
Press Return to continue: <Enter>
** END OF REPORT **
```

Example: Internet Refill Report - Summary report, sorted by date

```
Select Output Reports Option: Internet Refill Report
You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.
DIVISION: ALBANY 500 ALBANY
ANOTHER ONE:
Beginning Date: 06.27.07 (JUN 27, 2007)
Ending Date: 08.16.07 (AUG 16, 2007)
     Select one of the following:
                  Patient
                  Date
                  Result
Sort by Patient/Date/Result (P/D/R): R// Date
    Select one of the following:
                  Detail
         S
                  Summary
Print Detail/Summary report (D/S): S// Summary
DEVICE: HOME// [Select Print Device]
```

INTERNET REFILL BY DATE - Summary AUG 16,2007@15:31 PAGE: 1 For date range JUN 27, 2007 through AUG 16, 2007 for ALBANY					
Date Processed	Filled	Not Filled	Total		
JUN 28, 2007 JUL 17, 2007 JUL 20, 2007 JUL 23, 2007 JUL 26, 2007 JUL 30, 2007 AUG 02, 2007 AUG 03, 2007 AUG 10, 2007 AUG 15, 2007	1 1 0 1 0 0 0 0 0 0	0 0 1 0 3 2 1 1 1 0	1 1 1 1 3 2 1 1 1 1		
COUNT: 4 9 13					
Press Return to continue: <enter></enter>					
** END OF REPORT **					

Example: Internet Refill Report - Detailed report, sorted by result

```
Select Output Reports Option: Internet Refill Report
You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.
DIVISION: ALBANY 500 ALBANY
ANOTHER ONE: <Enter>
Beginning Date: 06.27.07 (JUN 27, 2007)
Ending Date: 08.16.07 (AUG 16, 2007)
     Select one of the following:
                  Patient
          Ρ
                   Date
                   Result
Sort by Patient/Date/Result (P/D/R): R// Result
     Select one of the following:
                  Detail
                  Summary
Print Detail/Summary report (D/S): S// Detail
Do you want this report to print in 80 or 132 column format: 80// <Enter>
DEVICE: HOME// [Select Print Device]
```

```
INTERNET REFILL REPORT BY RESULT - Detail
                                  AUG 16,2007@15:31
Not Filled - For date range JUN 27, 2007 through AUG 16, 2007 for ALBANY
Patient
                       Rx # Date
               Reason
OPPATIENT, SEVEN (0117) 100002432 07/30/07
              Cannot refill Rx # 100002432
OPPATIENT, TWO (0270)
                      100002424 07/26/07
               Cannot refill Rx # 100002424
OPPATIENT, ONE (0285) 100002435 07/30/07
               Cannot refill Rx # 100002435
                      10065
OPPATIENT, FOUR (0358)
                                07/26/07
               Cannot refill Rx # 10065 Narcotic Drug
OPPATIENT, ELEVEN (0359)
                    100002461 08/10/07
               Patient Died on AUG 10
```

Example: Internet Refill Report – Detailed report, sorted by result (continued)

Example: Internet Refill Report - Summary report, sorted by result

```
Select Output Reports Option: Internet Refill Report
You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.
DIVISION: ALBANY 500 ALBANY
ANOTHER ONE: <Enter>
Beginning Date: 06.27.07 (JUN 27, 2007)
Ending Date: 08.16.07 (AUG 16, 2007)
    Select one of the following:
                   Patient
                   Date
         R
                   Result
Sort by Patient/Date/Result (P/D/R): R// Result
     Select one of the following:
                  Detail
                  Summary
Print Detail/Summary report (D/S): S// Summary
DEVICE: HOME// [Select Print Device
```

```
INTERNET REFILL REPORT BY RESULT - Summary AUG 16,2007@15:31 PAGE: 1
For date range JUN 27, 2007 through AUG 16, 2007 for ALBANY

Result Count

Filled 3
Not Filled 9

Total: 12

Press Return to continue: <Enter>

** END OF REPORT **
```

List of Patients/Prescriptions for Recall Notice [PSO RECALL LIST]

This report lists prescriptions containing medications associated with specific recall criteria, such as lot numbers and/or National Drug Code (NDC) numbers.

This new option has been placed under the Output Reports [PSO OUTPUTS] menu and prompts the user for the following criteria:

- Division
- Prescription Release Date Range
- Inclusion/Exclusion of Deceased Patients
- Medication Identifier

One of the following four medication identifiers may be selected:

```
1-NDC code2-Dispense Drug and Lot Number3-Dispense Drug only4-Drug Name (VA Generic or Orderable Item)
```

Example: List of Patients/Prescriptions for Recall Notice - Input

```
Division: ^ALL
   From Release Date: T-90// (OCT 30, 2009)
  To Release Date: T// (JAN 28, 2010)
  Exclude Deceased Patients? YES//
     Select one of the following:
              DISPENSE DRUG AND LOT NUMBER
                  DISPENSE DRUG
                  DRUG NAME (VA GENERIC OR ORDERABLE ITEM)
  Select 1-4: 4 DRUG NAME (VA GENERIC OR ORDERABLE ITEM)
  VA GENERIC DRUG: PREDNISONE
   Dispense Drugs
    1 - PREDNISONE 1MG TAB
    2 - PREDNISONE 5MG TAB
    3 - PREDNISONE 20MG S.T.
  Enter a list or range of numbers (1-3): 1-3
   VA GENERIC DRUG:
       ** To avoid undesired wrapping of the output data,
       ** please enter '0;256;999' at the 'DEVICE:' prompt. **
   DEVICE: HOME// 0;256;999 GENERIC INCOMING TELNET
```

Example: List of Patients/Prescriptions for Recall Notice – Input (continued)

```
Before continuing, please set up your terminal to capture the detailed report data. On some terminals, this can be done by clicking on the 'Tools' menu above, then click on 'Capture Incoming Data' to save to Desktop. This report may take a while to run.
```

The output of this report is in a delimited output format suitable for export to MS Excel and includes data from original prescription fills, refills, partial fills, and Consolidated Mail Outpatient Pharmacy (CMOP) fills. The report output is sorted primarily by patient name and secondarily by prescription number.

Each fill of the prescription is printed on a separate line preceded by a "HEADER" line containing patient demographic information. Each prescription detail line starts with a double backslash followed by an identifier to denote the type of fill (ORIGINAL, REFILL, PARTIAL, or CMOP).

Example: List of Patients/Prescriptions for Recall Notice - Output

```
\\HEADER\^RX #^DRUG NAME^PATIENT^SSN^ADDRESS 1^ADDRESS 2^ADDRESS
3^CITY^STATE^ZIP^PHONE (HOME) ^PHONE (WORK) ^PHONE (CELL) ^DECEASED?
 \\ORIGINAL\^RX #^ISSUE DATE^FILL DATE^RELEASED DATE/TIME^EXPIRATION
DATE^LOT #^NDC^DIVISION^PHARMACIST^PROVIDER^RETURNED TO STOCK^PATIENT
STATUS^QTY PER DAY^# OF REFILLS^MAIL/WINDOW
 \\REFILL\^RX #^REFILL DATE^RELEASED DATE/TIME^QTY PER DAY^LOT#^NDC^
DIVISION^RETURNED TO STOCK^PROVIDER^PARMACIST NAME^MAIL/WINDOW
 \\PARTIAL\^RX #^PARTIAL DATE^RELEASED DATE/TIME^NDC^LOT #^OTY PER DAY
^DIVISION^ RETURNED TO STOCK^PROVIDER^PHARMACIST NAME^FILLING PERSON^
REMARKS^MAIL/WINDOW
 \\CMOP\^RX #^TRANSMISSION NUMBER^SEQUENCE #^NDC SENT^NDC RECEIVED^RX
INDICATOR^STATUS^CANCELLED DATE/TIME^CANCELLED REASON^RESUBMIT STATUS^
DATE SHIPPED^CARRIER^PACKAGE ID
 \\HEADER\^301188^PREDNISONE 20MG S.T.^SURPAT,RODNEY^666000148^123
 ^^^TROY^NEW YORK^12180^^^N
 \\ORIGINAL\^301188^9/25/07^9/25/07^9/25/07 15:10:33^9/25/08^^^TROY^
 PHARNAM, DAVID DOCNAM, SUZY SC LESS THAN 50% 211 W
 \\REFILL\^301188^11/14/07^11/14/07 11:09:40^2^^^TROY^^PHARNAM,DAVID^
DOCNAM, SUZY^W
 \\CMOP\^301188^179^1^11/18/07 10:22^11/18/07 11:17^2^TRANSMITTED^^^^
11/19/07^^
 \\HEADER\^100002832^PREDNISONE 20MG S.T.^TRAPATNM,STEVE^ 666000187^12345
 ^^^TROY^NEW YORK^12180^518-472-4307^^^N
\\ORIGINAL\^100002832^2/8/10^2/8/10^2/8/10 15:16:51^2/9/11^^00009-0165-02
 ^EXT^TESTMAN, PHARM^TESTMAN, PROV^^SC LESS THAN 50%^1^11^W
\\PARTIAL\^100002832^2/8/10^2/8/10 15:16:51^^^1^EXT^^TESTMAN,PHARM
 ^TESTMAN, PROV^^W
```

List Prescriptions on Hold[PSO HOLDRPT]

This report lists prescriptions that have a hold status.

Management Reports Menu [PSO MGMT REPORT MENU]

With this menu the user can compile data for daily or monthly management reports. When the data has been compiled, the reports can be viewed on screen (132 columns) or printed on a 132-column printer.

Important

Before printing the first management report, the *Initialize Daily Compile* option must be run. This option compiles past management data for a user specified date range and then queues a job to run every morning at 1:00 a.m. to compile the previous day's data.

15.1.1.

This menu contains the following options:

- Daily Management Report Menu ...
- Date Range Recompile Data
- Initialize Daily Compile
- Monthly Management Report Menu ...
- One Day Recompile Data
- Purge Data

Daily Management Report Menu [PSO MGMT REPORT DAILY MENU]

This menu contains the following options for printing the daily management reports:

- All Reports
- Cost of Prescriptions
- Count of Prescriptions
- Intravenous Admixture
- Type of Prescriptions Filled

All Reports

[PSO MGMT REPORTS ALL DAILY]

This option prints all of the daily management reports for Outpatient Pharmacy that includes the Intravenous Admixture, Cost of Prescriptions, Prescription Count, and Type of Prescriptions Filled reports. They can be printed for a specific division or for all divisions if the site is multidivisional.

Cost of Prescriptions

[PSO MGMT REPORT RX COSTS]

This report contains the average cost and total cost for staff prescriptions, fee prescriptions, all prescriptions, equivalent fills, methadone prescriptions (if a methadone program exists), and participating pharmacies prescriptions.

Count of Prescriptions

[PSO MGMT REPORT RX COUNTS]

This report contains the total number of prescriptions filled during the specified month(s). It contains the patient category, number of equivalent fills, total prescriptions, total methadone prescriptions (if a methadone program exists), and patient requests.

Intravenous Admixture

[PSO MGMT REPORT IV]

This report contains the total, average cost for piggybacks and syringes, L.V.P., T.P.N., and Chemotherapy used for outpatients only. A grand total for each month is also provided.

Type of Prescriptions Filled [PSO MGMT REPORT TYPE OF RX]

This report contains the total number of prescriptions filled by fee and staff physicians, new and refill prescriptions, prescriptions sent by mail or dispensed at the window, prescriptions filled by participating pharmacies, and investigation drug prescriptions.

Date Range Recompile Data [PSO MGMT RPT RANGE COMPILE]

The management data for a user specified date range could be compiled/recompiled with this option. The data must be recompiled if prescription data has changed for prescriptions filled or refilled before today.

Initialize Daily Compile [PSO MGMT RPT DAILY COMPILE]

This option queues a job to run every day at 1:00 a.m. to compile the previous day's management reports data. It also compiles the management data for a specific date range. When initializing the compiling of data prior to yesterday's date, the default date will be either today plus 1 at 1:00 a.m. (T+1@01:00) if the option has never been queued or the date and time this option has already been queued to run.

This option must be run to initialize the compiling of management report data before the management reports are printed.

Monthly Management Report Menu [PSO MGMT REPORT MONTHLY MENU]

This menu contains options for printing the monthly management reports. The monthly management reports can be printed for previous months, but not the current month. The options are:

- All Reports
- Cost of Prescriptions
- Count of Prescriptions
- Intravenous Admixture
- Type of Prescriptions Filled

All Reports

[PSO MGMT MONTHLY ALL REPORTS]

Print all of the monthly management reports with this option. These reports include the Intravenous Admixture, Cost of Prescriptions, Count of Prescriptions, and Type of Prescriptions Filled reports.

Cost of Prescriptions

[PSO MGMT MONTHLY RX COSTS]

This report contains the average and total cost for staff prescriptions, fee prescriptions, all prescriptions, equivalent fills, methadone prescriptions (if a methadone program exists), and participating pharmacies prescriptions.

Count of Prescriptions

[PSO MGMT MONTHLY RX COUNTS]

This report contains the total number of prescriptions filled during the specified month(s). It includes the patient category, number of equivalent fills, total prescriptions, total methadone (if methadone program exists), and patient requests.

Intravenous Admixture

[PSO MGMT MONTHLY IV]

This report contains the total and average cost for piggybacks and syringes, L.V.P., T.P.N., and Chemotherapy, plus the grand total for each month.

Type of Prescriptions Filled

[PSO MGMT MONTHLY TYPE OF RX]

This report contains the number of prescriptions filled by fee and staff physicians, new and refill prescriptions, prescriptions sent by mail or dispensed at the window, prescriptions filled by participating pharmacies, and investigational drug prescriptions.

One Day Recompile Data [PSO MGMT REPORT MONTHLY MENU]

The management data for a user specified day can be compiled/recompiled with this option.

Purge Data

[PSO MGMT DATA PURGE]

Delete data from the OUTPATIENT PHARMACY MANAGEMENT DATA file with this option. The default starting date will always be the first date in the file.

Medication Profile

[PSO P]

This report is the same as the "Medication Profile" described in "Chapter 15: Using the Medication Profile".

Monthly Drug Cost [PSO MONTHLYCOST]

This report lists the monthly drug costs and can be printed for a selected drug or all drugs. This report must be printed on a 132-column printer.

Narcotic Prescription List [PSO NARC]

This report lists the quantity, provider, fill date, patient, and patient ID for each prescription for narcotic drugs filled during the specified time period. This report must be printed on a 132-column printer.

Non-Formulary List [PSO NONFORM]

This report lists all active drugs that have been designated as non-formulary. Non-formulary drugs are those that have not been approved for routine use by the Pharmacy and Therapeutics Committee of the medical center. These items can be dispensed under special circumstances when approved by the designated authority.

Non-VA Meds Usage Report [PSO NON-VA MEDS USAGE REPORT]

This report lists the patient's Non-VA medical orders that are documented via the CPRS GUI package. The Patient Name, Order Status, Orderable Item, Date Documented, or Order Checks are the available sorting criteria for this report. (When sorting by Order Checks, the Non-VA Med orders with Order Checks will print before any Non-VA Med orders without Order Checks. When sorting by Status, the Active Non-VA Med orders will be displayed before the Inactive Non-VA Med orders.) It is an 80-column report available for printing to the screen or to a print device.

Example: Non-VA Meds Usage Report

```
Select Outpatient Pharmacy Manager Option: OUTPut Reports
Select Output Reports Option: NON-VA Non-VA Meds Usage Report
FROM DATE DOCUMENTED: 11.08.03 (NOV 08, 2003)
TO DATE DOCUMENTED: 02.06.04 (FEB 06, 2004)
    Enter the SORT field(s) for this Report:
       1 - PATIENT NAME
       2 - ORDERABLE ITEM
       3 - DATE DOCUMENTED
       4 - STATUS
       5 - ORDER CHECKS
    Or any combination of the above, separated by comma,
    as in these examples:
       2,1 - BY ORDERABLE ITEM, THEN BY PATIENT NAME
      5,1,4 - BY ORDER CHECKS, THEN BY PATIENT NAME, THEN BY STATUS
SORT BY: PATIENT NAME // 1
     SORT BY PATIENT NAME
     You may select a single or multiple PATIENTS,
     or enter ^ALL to select all PATIENTS.
                                                2-23-54
     PATIENT: OPPATIENT3, ONE OPPATIENT3, ONE
                                                    1-11-70
     PATIENT: OPPATIENT18, ONE OPPATIENT18, ONE
     PATIENT:
DEVICE: HOME// <Enter>
```

Example: Non-VA Meds Usage Report (continued)

Non-VA Meds Usage Report Page: 1 Sorted by PATIENT NAME Date Range: 10/29/2003 - 02/06/2004 Run Date: Feb 06, 2004@13:51:08 ______ OPPATIENT3, ONE (ID: 6789) Patient Phone #: 555-555-5555 Non-VA Med: ACIVICIN Dispense Drug:
Schedule: 3-4 TIMES A DAY
Status: ACTIVE
Documented By: OPCLERK10, FOUR
Med Route: INTRA
CPRS Order #: 12510
Documented Date: 11/06,
Start Date: 01/01, Dispense Drug: Dosage: 2 ML Med Route: INTRAMUSCULAR Documented Date: 11/06/2003 Start Date: 01/01/2003 Statement/Explanation: Medication prescribed by Non-VA provider. PATIENT WANTED TO BUY FROM WALGREENS BECAUSE OF COPAY. Non-VA Med: IMIPRAMINE Dispense Drug: IMIPRAMINE 50MG TAB

Schedule: FOUR TIMES A DAY AFTER MEALS

Med Route: MOUTH & AT BEDTIME Status: DISCONTINUED on 12/20/2003 CPRS Order #: 12514

Documented By: OPCLERK16, FOUR Documented Date: 11/20/2003

Clinic: 161 - LAB Clinic: 161 - LAB Start Date: 11/01/2003 Patient Phone #: OPPATIENT18, ONE (ID: 6789) Non-VA Med: RANITIDINE Dispense Drug: RANITIDINE 150MG TAB

Schedule: EVERY OTHER DAY

Status: ACTIVE

Documented By: OPCLERK1, FOUR

Clinic: 285 - DIABETIC

Dosage: 300MG

Med Route: MOUTH

CPRS Order #: 12593

Documented Date: 12/18, Dosage: 300MG Med Route: MOUTH Documented Date: 12/18/2003 Start Date: 12/18/2003 Order Check #1: Duplicate drug class order: HISTAMINE ANTAGONISTS (NIZATIDINE CAP, ORAL 150MG TAKE TWO CAPSULES EVERY MORNING AND TAKE TWO CAPSULES EVERY EVENING WITH FOOD [ACTIVE]) Override Reason: Doctor's Therapy Override Provider: OPPROVIDER21, TWO Statement/Explanation: Non-VA medication not recommended by VA provider ______ Total: 2 patients and 3 orders.



Non-VA Meds are automatically discontinued when a Date of Death has been entered for a patient. In the event a Date of Death is entered in-error and subsequently deleted, the Non-VA Meds will be automatically reinstalled to an active status if they were active before they were discontinued.

Poly Pharmacy Report [PSO POLY]

This report lists a patient or patients with a selected minimum amount of prescriptions within a selected number of days. The Non-VA Med orders are included in the amount of prescriptions and are displayed, after all of the medications distributed by the VA, on this report. Only active prescriptions show on this report. The class column of this report is the drug classification from the DRUG file.

Released and Unreleased Prescription Report[PSO RELEASE REPORT]

This report lists released and unreleased prescriptions by date range. The start date default is the date the package is installed and the end date default will be the current date.

Prescription List for Drug Warnings[PSO RX LIST]

This report lists all prescriptions that have been finished with a particular medication(s) within a given date range.

This new option has been placed under the Output Reports [PSO OUTPUTS] menu and uses a sort template PSO DRUG WARNINGS.

Example: Prescription List for Drug Warnings – Input

```
** To avoid undesired wrapping of the output data,
        ** please enter '0;256;999' at the 'DEVICE: prompt. **
EXCLUDE DECEASED PATIENTS (Y/N) Y// ES
START WITH DIVISION: FIRST//
    START WITH DRUG: FIRST//
     * Previous selection: FINISH DATE/TIME from Oct 25,2009 to Oct
27,2009@24:00
     START WITH FINISH DATE/TIME: Oct 25,2009// (OCT 25, 2009)
     GO TO FINISH DATE/TIME: Oct 27,2009// (OCT 27, 2009)
DEVICE: GENERIC INCOMING TELNET
    Before continuing, please set up your terminal to capture the
    detailed report data. On some terminals, this can be done by
    clicking on the 'Tools' menu above, then click on 'Capture
    Incoming Data' to save to Desktop. This report may take a
    while to run.
Press Return to Continue:
```

The output of this report is in a delimited output format suitable for export to MS Excel and includes data from original prescription fills, refills, partial fills, and Consolidated Mail Outpatient Pharmacy (CMOP) fills. The report output is sorted primarily by patient name and secondarily by prescription number.

Each fill of the prescription is printed on a separate line preceded by a "HEADER" line containing patient demographic information. Each prescription detail line starts with a double backslash followed by an identifier to denote the type of fill (ORIGINAL, REFILL, PARTIAL, or CMOP).

Example: Prescription List for Drug Warnings - Output

```
\\HEADER\^RX #^DRUG NAME^PATIENT^SSN^ADDRESS 1^ADDRESS 2^ADDRESS
3^CITY^STATE^ZIP^PHONE (HOME) PHONE (WORK) PHONE (CELL) DECEASED?
\\ORIGINAL\^RX #^ISSUE DATE^FILL DATE^RELEASED DATE/TIME^EXPIRATION
DATE^LOT #^NDC^DIVISION^PHARMACIST^PROVIDER^RETURNED TO STOCK^PATIENT
STATUS^QTY PER DAY^# OF REFILLS^MAIL/WINDOW
\\REFILL\^RX #^REFILL DATE^RELEASED DATE/TIME^QTY PER DAY^LOT#^NDC^
DIVISION^RETURNED TO STOCK^PROVIDER^PARMACIST NAME^MAIL/WINDOW
\\PARTIAL\^RX #^PARTIAL DATE^RELEASED DATE/TIME^NDC^LOT #^QTY PER DAY
^DIVISION^ RETURNED TO STOCK^PROVIDER^PHARMACIST NAME^FILLING PERSON^
REMARKS^MAIL/WINDOW
\\CMOP\^RX #^TRANSMISSION NUMBER^SEQUENCE #^NDC SENT^NDC RECEIVED^RX
INDICATOR^STATUS^CANCELLED DATE/TIME^CANCELLED REASON^RESUBMIT STATUS^
DATE SHIPPED^CARRIER^PACKAGE ID
\\HEADER\^301188^PREDNISONE 20MG S.T.^SURPAT,RODNEY^666000148^123
^^^TROY^NEW YORK^12180^^^N
\\ORIGINAL\^301188^9/25/07^9/25/07^9/25/07 15:10:33^9/25/08^^^TROY^
PHARNAM, DAVID DOCNAM, SUZY SC LESS THAN 50% 2 11 W
\\REFILL\^301188^11/14/07^11/14/07 11:09:40^2^^^TROY^^PHARNAM,DAVID^
DOCNAM, SUZY^W
\CMOP\^301188^179^1^11/18/07 10:22^11/18/07 11:17^2^TRANSMITTED^^^^
11/19/07^^
\\HEADER\^100002832^PREDNISONE 20MG S.T.^TRAPATNM,STEVE^ 666000187^12345
^^^TROY^NEW YORK^12180^518-472-4307^^^N
\\ORIGINAL\^100002832^2/8/10^2/8/10^2/8/10 15:16:51^2/9/11^^00009-0165-02
^EXT^TESTMAN,PHARM^TESTMAN,PROV^^SC LESS THAN 50%^1^11^W
\\PARTIAL\^100002832^2/8/10^2/8/10 15:16:51^^^1^EXT^^TESTMAN,PHARM
^TESTMAN, PROV^^W
```

Chapter 17: Using the Pharmacy Intervention Menu

This chapter describes the options in the *Pharmacy Intervention Menu*.



This menu is locked with the PSORPH key.

Pharmacy Intervention Menu

[PSO INTERVENTION MENU]

The *Pharmacy Intervention Menu* option enables the user to enter, edit, print, delete, or view interventions in the APSP INTERVENTION file.

The following options are available on this menu:

- Enter Pharmacy Intervention
- Edit Pharmacy Intervention
- Print Pharmacy Intervention
- Delete Intervention
- View Intervention

Enter Pharmacy Intervention

[PSO INTERVENTION NEW ENTRY]

When it is necessary to interrupt the filling of a prescription to contact the provider in order to change, clarify, or cancel the prescription, use this option to add a new intervention entry into the APSP INTERVENTION file.

Edit Pharmacy Intervention [PSO INTERVENTION EDIT]

Use this option to edit an already existing entry in the APSP INTERVENTION file.

Print Pharmacy Intervention [PSO INTERVENTION PRINTOUT]

A captioned report of pharmacy interventions for a certain date range can be printed with this option. The report prints out on normal width paper and it can be queued to print at a later time.

The "subtotal" on this report represents the number of interventions for a specific type of intervention where the recommendation for the intervention was accepted. The "total" is the sum of all interventions in which the recommendation was accepted.

The "sub count" on this report is the number of interventions for a specific type of intervention over the specific date range. The "count" is the total number of all interventions over the specific date range.

Delete Intervention

[PSO INTERVENTION DELETE]

This option can be used to delete an intervention from the APSP INTERVENTION file. An intervention can be deleted only on the same day that it was entered.

View Intervention

[PSO INTERVENTION VIEW]

This option displays pharmacy interventions in a captioned format. More than one intervention can be viewed at a time.

Chapter 18: Processing Drug/Drug Interactions

This chapter describes the option used for processing drug interactions.

Process Drug/Drug Interactions

[PSO INTERACTION VERIFY]

This option can be used to process information for medications that have been marked as a drug/drug interaction. This allows prescriptions with drug/drug interactions to be processed, deleted, or bypassed. An assigned signature code, which will not appear on the screen, must be entered to complete any of these actions. It will then be verified or non-verified. The *Electronic Signature Code Edit* option can be found under the *User's Toolbox* menu in Kernel V. 8.0.



When processing a drug/drug interaction, the profile will list the status of the interacting drug orders as pending (P).

(This page included for two-sided copying.)

Chapter 19: Releasing Medication

This chapter describes the option used for releasing medications.

Release Medication

[PSO RELEASE]

The *Release Medication* option is used at the time the prescription is filled and ready to be given to the patient. Inventory is decreased, certain fields in the file are updated, and a copay is generated if the action is applicable to the prescription. With this option, prescriptions can be batch processed. Communication is made with the Integrated Funds Control, Accounting and Procurement (IFCAP) and Integrated Billing (IB) software to generate copay charges. IFCAP and IB software handle patient billing, tracking of charges, and payment received.

The copay status of a prescription is re-evaluated whenever a fill is released. Various actions can occur based on changes to the criteria that determine the copay status of a prescription. The actions that may result at the time a fill is released are described below.

- 1. **No action is taken.** No changes to the criteria that determine copay status of a prescription have occurred.
- 2. The copay status of the prescription is automatically reset and an entry is placed in the Copay activity log.

Example: The drug for which the prescription is written is no longer marked for investigational use. The copay status of the prescription is reset from No Copayment to Copay.

3. The copay status of the prescription is automatically reset, an entry is placed in the Copay activity log, and a MailMan message is generated detailing missing information required for user follow up.

Example: The drug for which the prescription is written is no longer marked for investigational use. The copay status of the prescription is reset from No Copayment to Copay. The patient has been documented as being exposed to Southwest Asia Conditions during Persian Gulf War service since the last fill. A MailMan message will be generated informing the user that the 'Is this Rx for treatment related to service in SW Asia?' question must be addressed and documented using the *Reset Copay Status/Cancel Charges* option.

4. A MailMan message is generated detailing missing information required for user follow-up.

Example: A veteran is documented as having Agent Orange exposure. Refill #2 for a prescription entered into the system before the new medication copay exemptions took effect on January 1, 2002 is released. The prescription is copay eligible. A MailMan message will be generated informing recipients that the 'Is this Rx for treatment of Vietnam-Era Herbicide (Agent Orange) exposure?' question must be addressed. The copay status of the Rx may change based on the response entered using the *Reset Copay Status/Cancel Charges* option.

If a MailMan message is generated at the time a prescription fill is released, the recipients of the message will be the provider of record, the pharmacy user who finished the order, and holders of the PSO COPAY key. The message lists the patient name, prescription number, and medication ordered, current copay status, and applicable copay exemption questions that need addressing to determine the prescription's copay status. The *Reset Copay Status/Cancel Charges* option must be used to enter the responses to the medication copay exemption questions listed in the MailMan message. If responses are not entered for the applicable medication copay exemption questions, any subsequent refills when released for this prescription and possibly other prescriptions for this patient will continue to generate the same MailMan message.

Example: MailMan Message

```
Subj: PRESCRIPTION QUESTIONS REVIEW NEEDED (500) [#30364] 10/11/05@19:56
35 lines
From: OUTPATIENT PHARMACY PACKAGE In 'IN' basket. Page 1
OPPATIENT29, ONE (6543P) CHEYENNE VAM&ROC
Eligibility: SC LESS THAN 50% SC%: 20
            REIMBURSABLE INSURANCE
Disabilities: ARTHRITIS-10%(SC), FOREARM CONDITION-5%(NSC),
             FOREARM CONDITION-4% (NSC), BENIGN EYE GROWTH-0% (NSC),
            LOSS OF FIELD OF VISION-20% (SC),
Rx# 101906 (1) COPAY
ALBUTEROL SO4 0.083% INHL 3ML
Due to a change in criteria, additional information listed below is needed
to determine the final VA copay and/or insurance billable status for this Rx
so that appropriate action can be taken by pharmacy personnel.
Is this Rx for a Service Connected Condition?
Is this Rx for treatment related to service in SW Asia?
This message has been sent to the provider of record, the pharmacist who
finished the prescription order, and all holders of the PSO COPAY key.
Enter RETURN to continue or '^' to exit: <Enter>
-----example continues------
```

Example: MailMan Message (continued)

```
Subj: PRESCRIPTION QUESTIONS REVIEW NEEDED (500) [#30364] Page 2

Providers:
Please respond with your answer to the question(s) as a reply to this message. The prescription will be updated by the appropriate staff.

Staff assigned to update the Prescription responses:
Please use the RESET COPAY STATUS/CANCEL CHARGES option to enter the responses to the questions above, which may result in a Rx copay status change and/or the need to remove VA copay charges or may result in a charge to the patient's insurance carrier.

Note: The SC question is now asked for Veterans who are SC>49% in order to determine if the Rx can be billed to a third party insurance. These Veterans will NOT be charged a VA copay.

Supply, nutritional, and investigational drugs are not charged a VA copay but could be reimbursable by third party insurance.

Enter message action (in IN basket): Ignore//
```

An annual copayment cap is applied to patients in specific priority enrollment groups. Once a patient reaches the annual copayment cap, no further medication copay charges will be billed for the calendar year. An entry to that effect is made to the Copay Activity Log. The '\$' indicator remains next to the prescription number to indicate that the prescription is still copay eligible.

Integrated Billing software keeps track of all prescription fills not billed due to the annual cap.

Example: Copay Activity Log When Annual Cap Reached

Copay Ac	ctivity Log:	Rx Ref	Initiator Of Activity
1 10/2 Comment:	23/01 ANNUAL CAP RE NO BILLING FOR THIS		OPPHARMACIST11, THREE

If a patient falls below the annual copayment cap for whatever reason (e.g. prescription fill is returned to stock and copay charges cancelled), the Integrated Billing package can initiate copay charges to bring the patient back up to the annual copayment cap. Integrated billing software will go back and bill a copay charge for those fills previously not charged due to the annual cap, bringing the patient's total copayment up to the cap. Whenever this occurs an entry will be placed in the Copay activity log.

Example: Copay Activity Log With IB-Initiated Charge

Cop	pay Activity	Log:		
#	Date	Reason	Rx Ref	Initiator Of Activity
1	10/23/01	ANNUAL CAP REACHED	ORIGINAL	OPPHARMACIST11, THREE
Con	nment: NO B	ILLING FOR THIS FILL		
2	10/23/01	IB-INITIATED COPAY	ORIGINAL	OPPHARMACIST11, THREE
Con	nment: PARTI	AL CHARGE		

If a prescription is <u>not</u> in a releasable status, the user will be given an error message, such as:

- Prescription has a status of (status) and is not eligible for release.
- Prescription was deleted.
- Improper barcode format.
- Non-existent prescription.

Copay is not charged for a partial fill.

Important

This is a mandatory function that must be used by the pharmacy.

Changes to Releasing Orders function - Digitally Signed Orders Only

The release function in the *Patient Prescription Processing* option has been modified with patch PSO*7*131 to require that all digitally signed orders for Schedule II controlled substances (CSII orders) be released through the *Outpatient Rx's* option in the *Controlled Substances* (CS) menu. If DEA/PKI is activated and an order is digitally signed, the user will be advised that the order must be released through the *Outpatient Rx's* option in the *Controlled Substances* (CS) menu. The same message will display if a user attempts to release a digitally signed CSII order during Speed Release or when using the *Release Medication* option.



At this time the functionality for entering and processing digitally signed orders is part of a pilot project limited to only one site. System-wide implementation of this functionality requires further study and modifications.

Changes to Releasing Orders Function - ScripTalk®

The release function in the *Patient Prescription Processing* option has been modified to display a message to the user when the site is using a Bingo Board and when the patient is enrolled in ScripTalk®. This message will alert the user that the patient is enrolled in ScripTalk® and may need to have a verbal announcement that the prescription(s) is ready, instead of a visual announcement.

Example: Releasing Medication to a ScripTalk® Patient

```
Prescription Number 400693 Released
No Refill(s) to be Released
No Partial(s) to be Released

OPPATIENT16, ONE added to the WAITING display.
This patient is enrolled in ScripTalk and may benefit from a non-visual announcement that prescriptions are ready.

Press Return to Continue:
```

Changes to Releasing Orders Function – HIPAA NCPDP Global

The release function has been modified with patch PSO*7*148 to perform National Drug Code (NDC) validation for ePharmacy prescriptions. These changes also affect the Controlled Substance prescription release, which is performed through the Controlled Substances package.

The user releasing the third-party electronically billable prescription will be prompted for the NDC for the drug being dispensed to the patient. The NDC code previously retrieved when the prescription was finished will be presented as the current (default) NDC for the prescription. The other possible values that the user will be able to choose from are:

- NDC field value in the DRUG file, if valid and different than the current prescription NDC.
- LAST LOCAL NDC field value in NDC BY OUTPATIENT SITE sub-file in the DRUG file for the division filling the prescription, if valid and different that the current prescription NDC.
- NDC CODE field values in the SYNONYM sub-file in the DRUG file, if valid and different that the current prescription NDC.

If the NDC dispensed is not on the list to select, the user must contact the ADPAC or other designated person to add the NDC in a synonym multiple for that drug in the DRUG file.

If the NDC code selected matches the current NDC in the prescription no further NDC processing is required. However, if the user selects a different NDC, the following steps will occur:

- 1. Outpatient Pharmacy V. 7.0 will instruct the Electronic Claims Management Engine (ECME) to reverse the previous claim for the previous NDC code and submit a new claim for the newly selected NDC code.
- 2. The newly selected NDC code will be saved in the LAST LOCAL NDC field in NDC BY OUTPATIENT SITE sub-file in the DRUG file for the division filling the prescription.

The following examples show the new prompt for NDC validation during the release process.

Example: Releasing an ePharmacy Order – Selecting Default NDC

```
Select Outpatient Pharmacy Manager Option: RELEASE Medication

Enter PHARMACIST: OPPHARMACIST4, THREE

Enter/Wand PRESCRIPTION number: 100003853

NDC: 00580-0277-10// ?

Select one of the following valid NDC code(s) below:

1 - 00580-0277-10

NDC: 00580-0277-10// <Enter> 00580-0277-10

Prescription Number 100003853 Released
No Refill(s) to be Released
No Partial(s) to be Released
Press Return to Continue:
```

Example: Releasing an ePharmacy Order – Selecting Different NDC

```
Select Outpatient Pharmacy Manager Option: RELEASE Medication
Enter PHARMACIST: OPPHARMACIST4, THREE
Enter/Wand PRESCRIPTION number: 100003853
NDC: 00580-0277-10// ?
Select one of the following valid NDC code(s) below:
           1 - 00580-0277-10
           2 - 00580-0277-14
NDC: 00580-0277-10// 2 00580-0277-14
Prescription 100003853 successfully submitted to ECME for claim generation.
Claim Status:
Reversing and Rebilling a previously submitted claim...
Reversing...
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
Resubmitting...
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Waiting to process response
E PAYABLE
       Prescription Number 100003853 Released
       No Refill(s) to be Released
       No Partial(s) to be Released
```

Chapter 20: Returning Medication to Stock

This chapter describes the option used for returning medication to stock.

Return Medication to Stock

[PSO RETURNED STOCK]

This option is used when a prescription has been released, but has been refused, not picked up, or not given to the patient for some reason. Comments can be entered to explain why the medication was returned to stock.

A prescription can only be returned to stock if the prescription status is Active, Discontinued, or Expired. If the prescription is not released, there is no need to return it to stock. This function increases the inventory so that a more current level is maintained by the Outpatient Pharmacy package and removes the copay charge if it is applicable to the prescription. It is highly recommended that this option be used.

When an ePharmacy prescription is returned to stock, the software checks to see if it has a PAYABLE claim. If so, a request is sent to ECME to electronically reverse the claim with the third party payer. Also, if the prescription contains any unresolved DUR or REFILL TOO SOON reject, it will be marked resolved with the reason 'Prescription Returned To Stock'.

If a copay charge is removed by returning a prescription fill to stock, an entry will be placed in the Copay activity log documenting the action.

Example: Copay Activity Log

Cop #	ay Activity Date	Log: Reason	Rx Ref	Initiator Of Activity
_	======================================	REMOVE COPAY 'USED Returned	 	OPPHARMACIST9, THREE

If an **original fill** is returned to stock and reprinted, it can be released again. If a **refill** is returned to stock, the refill is deleted so the patient will not lose it.

(This page included for two-sided copying.)

Chapter 21: Processing a Prescription

This chapter describes the menu and options used in processing prescriptions.

Rx (Prescriptions)

[PSO RX]

The *Rx* (*Prescriptions*) menu allows the pharmacist to manipulate information that pertains to prescriptions. Actions are taken on prescriptions via this menu. Some previous options, such as renew, refill, edit, release, are now actions in the *Patient Prescription Processing* option found on this menu. Also, data now must be entered for the individual fields that are used to build a Sig.

Default values are also displayed for possible dosages, schedules, med routes, and patient instructions. When possible, default quantities are calculated using data entered into specific fields during medication order entry.

The following options are available on this menu:

- Patient Prescription Processing
- Barcode Rx Menu ...
- Complete Orders from OERR
- *Discontinue Prescription(s)*
- Edit Prescriptions
- ePharmacy Menu ...
- Third Party Payer Rejects View/Process
- Third Party Payer Rejects Worklist
- List One Patient's Archived Rx's
- Manual Print of Multi-Rx Forms
- Reprint an Outpatient Rx Label
- Signature Log Reprint
- View Prescriptions

Patient Prescription Processing [PSO LM BACKDOOR ORDERS]

This option is used to process outpatient medication through OERR V. 3.0. The *Patient Prescription Processing* option is found on the *Outpatient Pharmacy Manager Menu* and the *Pharmacist Menu* under the *Rx (Prescriptions)* option. This option uses List Manager features to allow the outpatient pharmacy manager and pharmacist to perform the following actions on a prescription without leaving this option.

- Enter a new Rx
- Discontinue
- Edit
- Refill
- Renew
- Hold
- Unhold
- Order a partial

- Release
- Reprint
- Copy
- Verify a prescription
- Show a profile
- View activity log
- Pull early from suspense

When a new drug order is processed (new, renewal, finish, verify, copy, or an edit that creates a new order), order checks are performed. These include checking for duplicate drug, duplicate drug class, drugdrug interaction, and drug-drug allergy.

The CPRS Auto Refill field can be updated using the *Pharmacy Systems Parameter Edit* [PSS MGR] option. This parameter works in conjunction with the PSOUATRF security key.

- When the CPRS Auto Refill field is set to YES and the PSOAUTRF security key has been assigned to at least one user, all refills placed in CPRS by the provider are processed and suspended with the next fill date and all routing is set to Mail automatically.
- When the CPRS Auto Refill field is set to NO or if the PSOAUTRF security key is not assigned, the manual refill process is required.

If the auto refill process fails, the order will not be processed and will require manual refilling. A MailMan message will be sent to the holders of the PSOAUTRF key describing the reason for not filling the auto refill. All of the refill activity, manual or automatic, is recorded in the Activity Log entry notes.

With Patch PSO*7*233, when a name is selected, if the patient's address is flagged with a Bad Address Indicator, a warning message is displayed. If the user has proper authorization (i.e., the PSO SITE parameter "EDIT PATIENT DATA" is set to Yes or the user holds the new PSO ADDRESS UPDATE security key), a prompt displays asking if the user wants to update the address.

Following the installation of patches PSO*7*207 and OR*3*238 (Remote Data Interoperability (RDI) trigger patch), order checks will be made using additional data from the Health Data Repository Interim Messaging Solution (HDR-IMS) and the HDR-Historical (HDR-Hx). This will contain both Outpatient orders from other VAMCs as well as from Department of Defense (DoD) facilities, if available. All remote prescription statuses will be included in order checking for a new order being processed from within backdoor Outpatient Pharmacy and for new orders being placed by CPRS or by Inpatient Medications. Any remote Outpatient order that has been expired or discontinued for 30 days or less will be included in the list of medications to be checked.



For the *Patient Prescription Processing*, if a temporary address has no end date, the following text is displayed in the Status column: "(Temp address from XXX 99,9999 till (no end date))".

The check for remote data availability is performed upon entering the patient's profile, rather than on each order, to ensure that both remote data and local data are used for order checking.

Note: Once the above patches have been installed, a new comment for remote order checks, "Now doing remote order checks. Please wait..." has been added to the screen. The previous comment, "Now doing order checks. Please wait..." is replaced by: "Now doing drug interaction and allergy checks. Please wait..."

The following will not be included in order checks (after patch PSO*7*243):

- Prescriptions with a status of "DELETED" in the STATUS field in the PRESCRIPTION file from a remote facility
- Prescriptions with a missing expiration date, unless the ISSUE DATE field of the PRESCRIPTION file is within the past year

Remote order checking added (after patch PSO*7*243):

- For drug class when orders are placed for locally defined drugs
- Allergy Analgesic class order checks only match against the specific 5-character class if the class begins with "CN10"

If for any reason remote order checks cannot be performed, the following message displays:

Remote data not available - Only local order checks processed.

Note: For remote order checking, if the remote order does not have a VA PRODUCT file VUID, then it will not be included in drug-drug order checks. However, future patches are planned to send/receive the drug class to the HDR, and then it will be possible to use non-standardized remote orders for duplicate drug class checks.

This option also prompts for International Classification of Diseases--9th edition (ICD-9) Diagnosis Codes (maximum of eight). Along with the PROVIDER key, the VistA Outpatient Pharmacy application evaluates the IBB Clinical Indicator Data Capture (CIDC) Insurance Switch to determine if CIDC prompts appear. This allows sites to choose whether to collect CIDC data.

These new ICD-9 Diagnosis Code prompts only appear when the:

- 1. User entering the prescription holds the PROVIDER key.
- 2. IBB CIDC Insurance Switch is set to 'YES'. (Yes = Prompt user for ICD-9 Diagnosis Codes)

User response to the ICD-9 Diagnosis Code prompts is optional.

This option is also found on the *Pharmacy Technician's Menu*, but with limited actions. A pharmacy technician can only enter a new order, refill, copy, renew, reprint, release, order a partial, or pull early from suspense.

When an order is an ePharmacy order (determined to be third party billable), the billing data is sent to ECME when an order is finished. ECME sends a message back to Outpatient Pharmacy displaying the status of the claim. This message displays for new, edited, copied, and renewed ePharmacy orders.

```
Is this correct? YES// <Enter>
-Rx 100003869A has been discontinued...

Prescription 100003919 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE
```

Entering a New Order

Actions display in the action area of the screen. Actions with parentheses () around them are invalid actions for that order. A double question mark (??) displays all the actions available, including the Outpatient Pharmacy actions described in the section "Using List Manager." If an invalid hidden action option is selected, a message will display in the message window. Outpatient Pharmacy hidden actions are displayed with the letters OP next to the action.

Example: Entering a New Order

```
Select Outpatient Pharmacy Manager Option: RX (Prescriptions)

Orders to be completed for all divisions: 14

Do you want an Order Summary? No// <Enter>
```

A summary list of the number of pending orders can be displayed by Division or by each Clinic within the Division where the user is signed on. This is helpful when completing batch orders. In this example, an individual patient name is entered.

```
Patient Prescription Processing
          Barcode Rx Menu ...
          Complete Orders from OERR
          Discontinue Prescription(s)
          Edit Prescriptions
          List One Patient's Archived Rx's
          Manual Print of Multi-Rx Forms
          Reprint an Outpatient Rx Label
          Signature Log Reprint
          View Prescriptions
Select Rx (Prescriptions) Option: PATient Prescription Processing
Select PATIENT NAME: OPPATIENT16 OPPATIENT16, ONE
                                                       04-03-41
                                                                     000246802
        SC VETERAN
Patient is enrolled to receive ScripTalk 'talking' prescription labels.
Eligibility: SC
RX PATIENT STATUS: SERVICE CONNECTED// <Enter>
```

If RDI is active and a patient has prescriptions at another location, when the user selects the patient to enter a new order from Patient Prescription Processing, the following message appears.

```
REMOTE PRESCRIPTIONS AVAILABLE!
Display Remote Data? N//
```

If the user responds **NO**, then the normal procedure occurs for entering prescriptions. If the user responds **YES**, the "Remote Facilities Visited" screen appears. See the Displaying a Patient's Remote Prescriptions section later in Entering a New Order for more details.

A detailed explanation of the different parts of the screen can be found under in Chapter 2: List Manager. The Patient Information screen is displayed on two screens; however, only the second screen is shown in this example.

Example: Entering a New Order (continued)

```
Patient Information
                           May 22, 2006 10:44:38
                                                       Page:
                                                               2 of
OPPATIENT16, ONE
 PID: 000-24-6802
                                              Ht(cm): 177.80 (02/08/2004)
 DOB: APR 3,1941 (60)
                                              Wt(kg): 90.45 (02/08/2004)
 SEX: MALE
Allergies:
   Remote: ASPIRIN, NON-OPIOID ANALGESICS
Adverse Reactions:
         Enter ?? for more actions
EA Enter/Edit Allergy/ADR Data PU Patient Record Update
DD Detailed Allergy/ADR List
                                   EX Exit Patient List
Select Action: Quit// <Enter>
-----example continues------
```

Although the default option is "Quit" at the "Select Action" prompt, pressing the Enter key here quits the Patient Information screen and displays the Medication Profile. This Medication Profile includes any Non-VA Med orders documented via the CPRS GUI application.

Medication Profile	May 22, 2006 10:44:	56 Page: 1 of 1					
OPPATIENT16, ONE							
PID: 000-24-6802		Ht(cm): 177.80 (02/08/2004)					
DOB: APR 3,1941 (60)		Wt(kg): 90.45 (02/08/2004)					
AGE: 60	Non-VA Meds on File	0.2					
Last entry on 01/13/03							
# RX # DRUG		ISSUE LAST REF DAY QTY ST DATE FILL REM SUP					
	ACTIVE						
		60 A> 05-22 05-22 3 30					
2 503886\$ DIGOXIN (LAN	OXIN) 0.2MG CAP	60 A> 05-07 05-07 5 30					
3 AMPICILLIN 250MG CAP							
NON-V							
GINKO EXT 1 TAB ONCE A DAY BY	MOUTH	Date Documented: 01/13/03					
IBUPROFPEN 50MG TAB		Date Documented: 12/10/02					
TERFENADINE TAB 200 MILIGRAMS							
MIX ½ CUP PDR & 6 OZ WATE	CR & DRINK 1 MIXED CU						
		Date Documented: 03/17/02					
Enter ?? for more a	ctions						
PU Patient Record Update	NO New O	rder					
PI Patient Information Select Action: Quit//	SO Selec	t Order					

If a double question mark (??) had been entered at the above "Select Action" prompt, the following hidden actions would display in the action area. Actions that apply only to outpatient orders are followed by (OP).

```
The following actions are also available:

RP Reprint (OP) OTH Other OP Actions DR Display Remote

RN Renew (OP) DN Down a Line QU Quit

DC Discontinue (OP) RD Re Display Screen LS Last Screen

RL Release (OP) PT Print List FS First Screen

RF Refill (OP) PS Print Screen GO Go to Page

PP Pull Rx (OP) > Shift View to Right + Next Screen

IP Inpat. Profile (OP) < Shift View to Left - Previous Screen

RS Reprint Sig Log SL Search List ADPL Auto Display(On/Off)

CM Manual Queue to CMOP RDD Fill/Rel Date Disply UP Up a Line

Select Action: Quit//
```

Typing in the letters **NO** creates a new order.

Example: Entering a New Order (continued)

```
May 22, 2006 10:44:56 Page: 1 of
Medication Profile
(Patient information is displayed here.)
          Enter ?? for more actions
PU Patient Record Update NO New Order
PI Patient Information SO Select Order
Select Action: Quit// NO New Order
Eligibility: SC
RX PATIENT STATUS: SERVICE CONNECTED// <Enter>
DRUG: ACETAMINOPHEN
  Lookup: GENERIC NAME
    1 ACETAMINOPHEN 1000MG TABLET CN100
2 ACETAMINOPHEN 160MG/5ML LIQUID CN10
3 ACETAMINOPHEN 325MG TABLET CN103
                                                 CN103
                                                              INFECTIOUS DISEASE
   RESTRICTED TO
     4 ACETAMINOPHEN 650MG SUPPOS. CN103
5 ACETAMINOPHEN AND CODEINE 30MG CN101
Press <RETURN> to see more, '^' to exit this list, '^^' to exit all lists, OR
CHOOSE 1-5: 1 1000MG TABLET CN100
    *** SAME CLASS *** OF DRUG IN RX #46309525 FOR ACETAMINOPHEN 500MG TAB
CLASS: CN103
             Status: Active
                                                            Issued: 09/21/05
                SIG: TAKE ONE TABLET BY MOUTH EVERY SIX(6) HOURS AS NEEDED
          QTY: 360 # of refills: 3
Provider: PROVIDER, ONE Refills remaining: 3
                                                 Last filled on: 09/21/05
                                                    Days Supply: 90
Discontinue RX # 46309525? NO -Prescription was not discontinued...
```

The system checks the medication selected for any duplicate drugs or classes, interactions, or allergies that are noted in the patient's local and remote record. This also includes any local Non-VA Meds. See the following example of local and remote order checking.

Example: Entering a New Order (continued)

```
Now doing remote order checks. Please wait...
    *** SAME CLASS *** OF DRUG IN REMOTE RX FOR ASPIRIN 325MG BUFFERED TAB
>> CHEYENNE VAMROC
CLASS: CN103
             Rx #: 712996
           Status: ACTIVE
                                                      Issued: 09/21/05
Processing Status: Released locally on 09/21/05@11:34:13 (Window)
              SIG: TAKE ONE TABLET BY MOUTH EVERY DAY
              OTY: 30
         Provider: PROVIDER, TWO
                                          Refills remaining: 11
                                              Last filled on: 09/21/05
                                                 Days Supply: 30
Press Return to continue... <Enter>
Now doing drug interaction and allergy checks. Please wait...
```



If a patient does not have an allergy assessment, the user will have to create an intervention. If the patient already has a prescription for which an Intervention was created, the user will have the option to copy the existing Intervention. For more information about copying an existing Intervention, refer to the *Complete Orders from OERR* section.



If the new order is for Clozapine, there are additional restrictions for filling a prescription. See "Chapter 8: Controlling the Dispensing of Clozapine" for more information.

```
A Drug-Allergy Reaction exists for this medication and/or class!
Drug: ACETAMINOPHEN 325MG TAB
Drug Class: CN103 NON-OPIOID ANALGESICS (REMOTE SITE(S))
Do you want to Intervene? Y// NO
```

If the drug or orderable item is edited, PROVIDER key users may be prompted for the appropriate ICD-9 Diagnosis Codes. User response is optional.

If prompted for ICD-9 Diagnosis Codes, the user can enter partial names and ICD-9 Diagnosis Code numbers or a valid Diagnosis Code number or name.

Example: Entering a New Order (continued)

```
Select Primary ICD-9 Code: neuropathy
    1 NEUROPATHY 337.1 AUT NEUROPTHY IN OTH DIS
2 NEUROPATHY 356.2 HERED SENSORY NEUROPATHY
3 NEUROPATHY 356.8 IDIO PERIPH NEURPTHY NEC
4 NEUROPATHY 356.9 IDIO PERIPH NEURPTHY NOS
5 NEUROPATHY 377.33 NUTRITION OPTC NEUROPTHY
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 3 356.8 IDIO PERIPH NEURPTHY NEC
Select Secondary ICD-9 Code: diabetes
    1 DIABETES 250.01 DIABETES MELLI W/O COMP TYP I COMPLICATION/CO
MORBIDITY
    2 DIABETES 250.11 DIABETES W KETOACIDOSIS TYPE I
                                                                         COMPLICATION/CO
MORBIDITY
    3 DIABETES 250.21 DIABETES W HYPEROSMOLAR TYPE I
                                                                          COMPLICATION/CO
MORRIDITY
    4 DIABETES 250.31
                                 DIABETES W OTHER COMA TYPE I COMPLICATION/CO
MORBIDITY
Press <RETURN> to see more, '^' to exit this list,
OR CHOOSE 1-4: 1 250.01 DIABETES MELLI W/O COMP TYP I
                                                                COMPLICATION/COMORBIDITY
Select Secondary ICD-9 Code: <Enter>
VERB: <Enter> TAKE
```

The list of available possible dosages display after order checks is linked to the drug ordered. The user can choose from the list or use free text to enter the dosage. Confirmation of the selected (or entered) dosage is required to confirm that it is correct.

```
Available Dosage(s)

1. 250MG
2. 500MG
3. 1000MG
Select from list of Available Dosages, Enter Free Text Dose or Enter a Question Mark (?) to view list: 3 500MG
You entered 500MG is this correct? Yes// <Enter> YES
```

For numeric dosages, the Dispense Units Per Dose value is calculated based on the strength of the dosage ordered divided by the strength of the medication ordered. For example, the 500 mg dosage ordered requires two 250 mg capsules. The Dosage Ordered is re-displayed after the Dispense Units to allow the entry to be verified.

```
DISPENSE UNITS PER DOSE(CAPSULES): 2// <Enter> 2
Dosage Ordered: 500MG
-----example continues------
```

If a Route has not been associated with the Dispense Drug, the default Route of PO or Oral will be displayed. A different Route can be entered or it can be deleted at this point if needed. The Route is not required to complete a prescription. If the abbreviation entered is in the stored list of possible routes, the entry will be expanded in the Sig.

Example: Entering a New Order (continued)

```
ROUTE: PO// <Enter> ORAL PO MOUTH

Or

ROUTE: PO// @ <Enter to delete>
```

A default schedule associated with the drug ordered is displayed. The default can be accepted or a different free text schedule can be entered. Free text entries cannot contain more than two spaces or be more than twenty characters long. Entries will be compared against a list of common abbreviations and expanded if the entry matches. Any entry not found in the list of common abbreviations will be displayed in the Sig as entered.

```
Schedule: QID// <Enter> (FOUR TIMES A DAY)
```

The LIMITED DURATION field is used only when a medication should be taken for a limited period of time. Days are assumed for numeric entries. Follow the number with an "H" to specify hours or an "M" to specify minutes.



Do not use the LIMITED DURATION field for Days Supply.

```
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 10 (DAYS)
```

The CONJUCTION field is used to join dosing sequences in complex orders. Entries are limited to AND, THEN, or EXCEPT. For concurrent doses, use AND; for example, "Take 1 tablet every morning AND take 2 tablets at bedtime." For consecutive doses, use "THEN"; for example, "Take 2 tablets daily for one week THEN take 1 tablet for five days." For any dosing sequence that is not routine, use "EXCEPT"; for example, "Take 1 tablet every day EXCEPT take no tablets Wednesday." See Appendix B for additional examples.

```
CONJUNCTION: <Enter>
```

Any entry in the PATIENT INSTRUCTIONS field will first be checked to see if it contains any abbreviations that can be expanded. The entry will be added to the end of the Sig, after the dosing information, and the entire Sig will be displayed.

```
PATIENT INSTRUCTIONS: WF WITH FOOD

(TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS WITH FOOD)

OTHER PATIENT INSTRUCTIONS: WF CON ALIMENTO
```

Two optional fields, OTHER LANGUAGE PREFERENCE and PMI LANGUAGE PREFERENCE in the PHARMACY PATIENT file, store if a patient has another language preference and if the patient's PMI sheets should print in English or Spanish at the CMOP. The CMOP functionality was requested for future CMOP use. When printing locally from Outpatient Pharmacy this parameter is not used. These fields are accessed through the *Update Patient Record* option and the protocol Patient Record Update [PSO PATIENT RECORD UPDATE]. If the other language preference is indicated for a patient, the user will be prompted to enter OTHER PATIENT INSTRUCTIONS after selecting the PATIENT INSTRUCTIONS field to enter/edit. If a quick code is entered at the OTHER PATIENT INSTRUCTIONS EXPANSIONS will print on the prescription label.

A default value for Days Supply based on patient status is displayed. A default quantity is calculated when possible. See Appendix B for more information on this calculation.

Example: Entering a New Order (continued)

```
DAYS SUPPLY: (1-90): 30// 10
QTY ( CAP ) : 80// <Enter> 80
```

Pharmacy Data Management (PDM) V. 1.0 patch PSS*1.0*61 added the NON REFILLABLE ("F") code to values for the DEA SPECIAL HDLG field of the DRUG file (#50). No refills will be allowed for any Outpatient Pharmacy prescription for a drug that contains an "F" in that field.

```
COPIES: 1// <Enter> 1
# OF REFILLS: (0-11): 11// 0
PROVIDER: OPPROVIDER4, TWO
CLINIC: OUTPT NURSE GREEN TEAM
MAIL/WINDOW: WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: < Enter>
REMARKS: <Enter>
ISSUE DATE: TODAY// <Enter> (MAY 30, 2006)
FILL DATE: (5/30/2006 - 6/9/2006): TODAY// <Enter> (MAY 30, 2006)
Nature of Order: WRITTEN// ??
                           Require Print Print on
 Nature of Order Activity E.Signature Chart Copy Summary
 WRITTEN
 VERBAL
                                           Х
                                                      Х
                                           Х
 TELEPHONED
                               Х
                                                      Х
 SERVICE CORRECTION
                                           Х
 POLICY
                                                       Х
 DUPLICATE
 SERVICE REJECT
Nature of Order: WRITTEN// <Enter> W
WAS THE PATIENT COUNSELED: NO// Y YES
WAS COUNSELING UNDERSTOOD: NO// Y YES
```

-----example continues-----

An option to add a progress note has been added. If "Yes" is entered at this prompt, the progress note entry will begin after the order information has been displayed and confirmed. The order is redisplayed, along with information on any service-connected disabilities on record.

Example: Entering a New Order (continued)

To determine if the order should be charged copay, eligible copay exemptions for the order are displayed one at a time. The user is asked if the order is being prescribed for the first service-connected condition displayed. If yes is entered at this point, the fill is set for No Copay and no other exemption questions are asked. Otherwise, the next eligible exemption is displayed and the question repeated. In the following example, the patient has reported exposure to herbicides during Vietnam-era service.

```
Was treatment related to Agent Orange exposure? NO
Is this correct? YES// <Enter>
Another New Order for OPPATIENT25,ONE? YES//
```

Entering a new order with Local or Free-Text Dosage

The software checks the medication selected for any interactions or allergies noted in the patient's record, which includes any Non-VA Meds. The next prompts shown will be the new fields used to build a Sig. The list of available possible dosages shown after order checks is linked to the drug ordered. One of the dosages listed may be chosen or a different, free text dosage may be entered. Confirmation of the dosage is required and the value entered is displayed again to allow the user to confirm that it is correct.

Medications with non-numeric dosages, such as ointments and creams, will display non-numeric possible default dosages. Because the dosage is non-numeric, values for dispense units per dose and quantity cannot be calculated.

Example: Entering a New Order with Local or Free-Text Dosage

```
DRUG: TYLENOL #3 ACETAMINOPHEN AND CODEINE 30MG CN101
...OK? Yes// (Yes)

Now doing order checks. Please wait...

Available Dosage(s)

1. 1 TABLET
2. 2 TABLET(S)
3. 3 TABLET(S)

Select from list of Available Dosages, Enter Free Text Dose or Enter a Question Mark (?) to view list: 2 2 TABLET(S)

You entered 2 TABLET(S) is this correct? Yes// <Enter> YES

OTHER LANGUAGE DOSAGE: DOS TABLETA(S)
```

-----example continues-----



The OTHER LANGUAGE DOSAGE field is only prompted for if a local or free-text dosage is entered and the patient has been identified as having another language preference.

For local or free-text dosages, the Dispense Units Per Dose and Dosage Ordered are not prompted for.



The optional field, OTHER LANGUAGE PREFERENCE in the PHARMACY PATIENT file, stores if a patient has another language preference. This field is accessed through the *Update Patient Record* option and the protocol Patient Record Update. If the other language preference is indicated for a patient, the user will be prompted to enter OTHER LANGUAGE DOSAGE.

If a Route has not been associated with the Dispense Drug, the default Route of PO or Oral will be displayed. A different Route can be entered or it can be deleted at this point if needed. The Route is not required to complete a prescription. If the abbreviation entered is in the MEDICATION ROUTES file, the entry will be expanded in the Sig based on the OUTPATIENT EXPANSION field.

Example: Entering a New Order with Local or Free-Text Dosage (continued)

```
ROUTE: PO// <Enter> ORAL PO MOUTH

Or

ROUTE: PO// @ <Enter to delete>
```

A default schedule associated with the Orderable Item of the drug ordered is displayed at the "Schedule:" prompt. The default can be accepted or a different free text schedule can be entered. Free text entries cannot contain more than two spaces or be more than twenty characters long. Entries will be compared against a list of common abbreviations, first in the ADMINISTRATION SCHEDULE file and then in the MEDICATION INSTRUCTION file, and expanded if the entry matches. Any entry not found in the list of common abbreviations will be displayed in the Sig as entered.

```
Schedule: QID// <Enter> (FOUR TIMES A DAY)
```

The LIMITED DURATION field is used only when a medication should be taken for a limited period of time. Days are assumed for numeric entries. The user should follow the number with a "H" to specify hours or a "M" to specify minutes.

NOTE: Do not use this field for Days Supply.

```
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 90 (DAYS)
```

The CONJUCTION field is used to join dosing sequences in complex orders. Entries are limited to AND, THEN, or EXCEPT. AND is used for concurrent doses, such as "Take 1 tablet every morning AND take 2 tablets at bedtime." THEN is used for consecutive doses, such as "Take 2 tablets daily for one week THEN take 1 tablet for five days." EXCEPT is used to describe any dosing sequence that is not routine, such as "Take 1 tablet every day EXEPT take no tablets Wednesday." See Appendix B for examples.

```
CONJUNCTION: <Enter>
```

Any entry in the PATIENT INSTRUCTIONS field will first be checked to see if it contains any abbreviations that can be expanded. The entry will be added to the end of the Sig, after the dosing information, and the entire Sig will be displayed.

```
PATIENT INSTRUCTIONS: WF WITH FOOD

(TAKE 2 TABLETS BY MOUTH FOUR TIMES A DAY FOR 90 DAYS WITH FOOD)

OTHER PATIENT INSTRUCTIONS: WF CON ALIMENTO
```

-----example continues-----



Patch PSS*1*47 adds two optional fields, OPTHER LANGUAGE PREFERENCE and PMI LANGUAGE PREFERENCE in the PHARMACY PATIENT file that stores if a patient has another language preference and what language their PMI sheets should print at the CMOP. These fields are accessed through the *Update Patient Record* option and the protocol Patient Record Update. If the other language preference is indicated for a patient, the user will be prompted to enter OTHER PATIENT INSTRUCTIONS after selecting the PATIENT INSTRUCTIONS field to enter/edit. If a quick code is entered at the OTHER PATIENT INSTRUCTIONS PROMPTLY INSTRUCTIONS EXPANSIONS will print on the prescription label.

A default value for Days Supply based on patient status is displayed. A default quantity is NOT calculated for local and free-text dosages. See Appendix B for more information on QUANTITY calculations.

Example: Entering a New Order with Local or Free-Text Dosage (continued)

```
DAYS SUPPLY: (1-90): 30// 90
QTY ( CAP ): 720
```

The remaining prompts have not changed.

```
COPIES: 1// <Enter> 1
# OF REFILLS: (0-1): 1// 1
PROVIDER: OPPROVIDER4,TWO
CLINIC: OUTPT NURSE GREEN TEAM
MAIL/WINDOW: WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: <Enter>
REMARKS: <Enter>
ISSUE DATE: TODAY// <Enter> (MAY 30, 2006)
FILL DATE: (5/30/2006 - 6/9/2006): TODAY// <Enter> (MAY 30, 2006)
Nature of Order: WRITTEN// <Enter> W
WAS THE PATIENT COUNSELED: NO// Y YES
WAS COUNSELING UNDERSTOOD: NO// Y YES
```

-----example continues------

An option to add a progress note has been added. If "Yes" is entered at this prompt, the progress note entry will begin after the order information has been displayed and confirmed. The order is redisplayed, along with information on any service-connected disabilities on record.

Example: Entering a New Order with Local or Free-Text Dosage (continued)

Another New Order for OPPATIENT25, ONE? YES//

View of Rx

```
OP Medications (ACTIVE) May 30, 2006 16:48:05
                                                                    1 of 3
                                                            Page:
OPPATIENT29, ONE
                                                                    <A>
 PID: 000-87-6543
                                                  Ht (cm): 175.26 (06/07/2000)
 DOB: SEP 12,1919 (81)
                                                  Wt(kg): 79.09 (06/07/2000) f
               Rx #: 503908
 (1) *Orderable Item: ACETAMINOPHEN TAB
               Drug: ACETAMINOPHEN AND CODEINE 30MG
 (2)
               Verb: TAKE
 (3)
            *Dosage: 2 TABLET(S)
  Oth. Lang. Dosage: TRE TABLETA(S)
             *Route: ORAL
          *Schedule: QID
          *Duration: 10D (DAYS)
 (4) Pat Instructions: WITH FOOD
 Other Pat. Instruc: CON ALIMENTO
               SIG: TAKE 2 TABLET(S) BY MOUTH FOUR TIMES A DAY FOR 90 DAYS
                     WITH FOOD
(5) Patient Status: SERVICE CONNECTED
```

Entering a new order --ePharmacy (third party billable)

For patients who have active third party insurance and have the appropriate eligibility requirements, the software will submit electronic claims to their insurance companies when prescriptions for billable drugs are ordered.

After a WINDOW order is entered and finished, the billing data is sent to the Electronic Management Claims Engine (ECME). ECME sends a message back to Outpatient Pharmacy displaying the status of the claim. For MAIL orders, the communication between Outpatient Pharmacy and ECME occurs either during the Local Mail Label Print or during the CMOP transmission.

The following example shows the creation of a new WINDOW order starting with the "DRUG:" prompt.

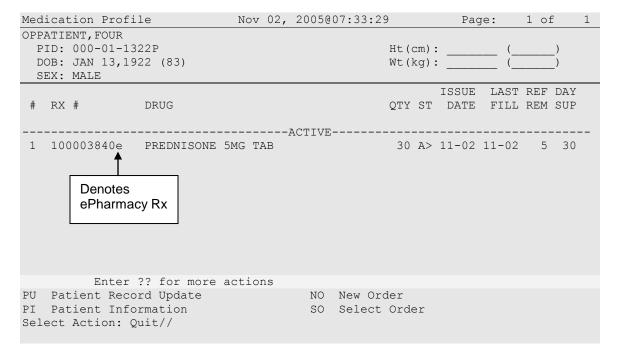
Example: Entering a New Order for ePharmacy Billing

```
Previously entered ICD-9 diagnosis codes: <Enter>
Select Primary ICD-9 Code: <Enter>
VERB: TAKE
Available Dosage(s)
      1. 20MG
      2. 40MG
Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 20MG
You entered 20MG is this correct? Yes// <Enter> YES
VERB: TAKE
DISPENSE UNITS PER DOSE (TABLET): 1// <Enter> 1
Dosage Ordered: 20MG
NOUN: TABLET
ROUTE: PO// <Enter>
   1 PO ORAL (BY MOUTH)
2 PO ORAL PO CHOOSE 1-2: 2 ORAL PO BY MOUTH
Schedule: TID (THREE TIMES A DAY)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 10 (DAYS)
CONJUNCTION: <Enter>
PATIENT INSTRUCTIONS: WF
WITH FOOD
```

Example: Entering a New Order for ePharmacy Billing (continued)

```
(TAKE ONE TABLET BY BY MOUTH THREE TIMES A DAY FOR 10 DAYS WITH FOOD)
DAYS SUPPLY: (1-90): 30// <Enter>
QTY ( TAB ) : 30// <Enter> 30
COPIES: 1// <Enter> 1
# OF REFILLS: (0-5): 5// <Enter>
PROVIDER: OPPROVIDER4, TWO
CLINIC: <Enter>
MAIL/WINDOW: WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: <Enter>
REMARKS: <Enter>
ISSUE DATE: TODAY// <Enter> (NOV 02, 2005)
FILL DATE: (11/2/2005 - 11/3/2006): TODAY// <Enter> (NOV 02, 2005)
Nature of Order: WRITTEN// <Enter>
WAS THE PATIENT COUNSELED: NO// YES
WAS COUNSELING UNDERSTOOD: NO// YES
Do you want to enter a Progress Note? No// <Enter> NO
Rx # 100003840
                     11/02/05
                                  #30
OPPATIENT, FOUR
TAKE ONE TABLET BY BY MOUTH THREE TIMES A DAY FOR 10 DAYS WITH FOOD
PREDNISONE 5MG TAB
OPPROVIDER4, TWO
                         OPPHARMACIST4, THREE
# of Refills: 5
Is this correct? YES// <Enter> YES
```

View of RX:



If a new order is rejected due to a Drug Utilization Review (DUR) or Refill Too Soon, the prescription will be marked as "REJECTED", and the user will have the opportunity to resolve the reject before continuing.

The following example shows a sample ECME transmission rejection, and how to resolve the rejection.

Example: Handling a Rejected New Order for ePharmacy Billing

```
Prescription 999999 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E REJECTED
```

```
*** REJECT RECEIVED FROM THIRD PARTY PAYER ***
                                                   NPI#: 39393939
Division : ALBANY
Patient : OPPATIENT, FOUR (000-01-1322P) Sex: M
                                                   DOB: JAN 13,1922(83)
Prescription: 99999999/0 - TESTOSTERONE (ANDROD ECME#: 1234567
Reject Type : 88 - DUR REJECT received on FEB 27, 2006@10:58:25
Payer Message: DUR Reject Error
Reason : ER (OVERUSE PRECAUTION)
DUR Text : ANDRODERM DIS 5MG/24
            : ANDRODERM DIS 5MG/24HR
Insurance
            : EMDEON
                                               Contact: 800 555-5555
Group Name : RXINS
                                         Group Number: 12454
Cardholder ID: 000011322P
```

Example: Handling a Rejected New Order for ePharmacy Billing (continued)

```
Select one of the following:

O (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES
I (I)GNORE - FILL Rx WITHOUT CLAIM SUBMISSION
Q (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O) verride, (I)gnore, (Q)uit: Q// O OVERRIDE
```

When a claim is rejected, typically the Payer provides a "Reason for Service Code", which displays on the reject as "Reason". The user can use this reason to then select which code is entered for "Professional Service Code" and "Result of Service Code". To see a list of service codes, enter? at the specified prompt.

```
Reason for Service Code: ER - OVERUSE PRECAUTION

Professional Service Code: RT RECOMMENDED LABORATORY TEST

Result of Service Code: 1G FILLED, WITH PRESCRIBER APPROVAL

Reason for Service Code: ER - OVERUSE PRECAUTION

Professional Service Code: RT - RECOMMENDED LABORATORY TEST

Result of Service Code: 1G - FILLED, WITH PRESCRIBER APPROVAL

Confirm? ? YES// <Enter>

Prescription 99999999 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Waiting for process response
E PAYABLE
```

For Refill Too Soon rejects, the same choices apply.

Displaying a Patient's Remote Prescriptions

If RDI is active and a patient has prescriptions at another location, when the user selects the patient to enter a new order from Patient Prescription Processing, the following message appears.

```
REMOTE PRESCRIPTIONS AVAILABLE!
Display Remote Data? N//
```

If the user responds **NO**, then the normal procedure occurs for entering prescriptions. If the user responds **YES**, the "Remote Facilities Visited" screen appears such as the following example.

```
Remote Facilities Visited Dec 30, 2008@17:26:47 Page: 1 of 1

Patient: PSOPATIENT,ONE (000-00-0000) DOB: 01/02/1967

Station
HDR CHEYENNE

Enter ?? for more actions

DR Display Remote Pharmacy Data
Action:Quit//DR
```

To display the prescriptions at the remote pharmacy location, enter DR at the "Action" prompt. The "Medication Profile – Remote" screen appears such as the following example.

Medication Profit	le - Remote Dec 30, 2008@17:29:	:43 Page: 1 of 2					
Patient: PSOPATI	ENT, ONE (000-00-0000)	DOB: 01/02/1967					
RX# DRI	UG	ST QTY ISSUED LAST FILLED					
HDR CHEYENNE							
712885 AM	OXICILLIN TRIHYDRATE 250MG CAP	A 90 11/06/08 11/06/08					
SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY							
	OVIDER: MCKAY, ELMER						
	LTIAZEM (INWOOD) 240MG CAP, SA						
SIC	G: TAKE ONE CAPSULE BY MOUTH EVER	RY DAY					
	OVIDER: MCKAY, ELMER						
	BETALOL HCL 200MG TAB						
SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY							
	OVIDER: MCKAY, ELMER						
712887 SII	MVASTATIN 20MG TAB	A 15 12/09/08 12/09/08					
SIG: TAKE ONE-HALF TABLET BY MOUTH EVERY EVENING TESTING							
	FOR PATTESTING FOR PATIENT TES						
FOR PATIENTENT INTRUCTION ON SIG1 TESTING FOR							
	PATIENT INTRUCTION ON SIG1 TES						
	REPLACE IENT WITH IENT TESTING	G FOR PATIENT					
+ Enter	?? for more actions						
Select Action:Ne	xt Screen//						

Editing an Order

An asterisk or star (*) is shown in front of each field that will create a new order if it is changed. The Sig field cannot be edited directly, but it will change if the fields that are used to build it are edited.

When editing fields preceded by an asterisk (*) in an ePharmacy order (or electronically third party billable prescription), upon acceptance of the edited order the original prescription will be discontinued and a new order created. If the latest fill of the original order has not been released and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription. For more information, see the example Editing an ePharmacy Order.

Do not use the up-arrow (^) after editing one field to jump past the rest of the fields. Using just the up-arrow results in the changes just entered being deleted. The user must press **Enter>** through *all* the order fields when editing to save the changes.

Example: Editing an Order

```
OP Medications (ACTIVE) May 30, 2006 16:48:05
                                                                  1 of
                                                                           3
OPPATIENT29, ONE
                                                                  <A>
  PID: 000-87-6543
                                                Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)
                                                 Wt(kg): 79.09 (06/07/2000) f
            Rx #: 503908
 (1) *Orderable Item: AMPICILLIN CAP, ORAL *** (N/F) ***
              Drug: AMPICILLIN 250MG CAP ***(N/F) ***
 (2)
 (3)
            *Dosage: 500 (MG)
               Verb: TAKE
     Dispense Units: 2
              Noun: CAPSULES
             *Route: ORAL
          *Schedule: QID
          *Duration: 10D (DAYS)
 (4) Pat Instructions: with food
               SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
                     WITH FOOD
 (5) Patient Status: SERVICE CONNECTED
       Enter ?? for more actions
DC Discontinue PR Partial
                                                 RL Release
   Edit
                        RF (Refill)
                                                 RN Renew
Select Action: Next Screen// ED Edit
Select fields by number: (1-19): 4
PATIENT INSTRUCTIONS: WITH FOOD// WITH FOOD AVOIDING DAIRY FOODS
```

-----example continues------

Changes to fields that are not starred (*), like Patient Instructions, will not create a new order. Note that the new Patient Instruction text appears at the end of the Sig.

Example: Editing an Order (continued)

```
OP Medications (ACTIVE)
                           May 30, 2006 16:54:25
                                                        Page:
                                                                1 of
OPPATIENT29, ONE
                                                               <A>
 PID: 000-87-6543
                                               Ht(cm): 175.26 (06/07/2000)
 DOB: SEP 12,1919 (81)
                                               Wt(kg): 79.09 (06/07/2000)
             Rx #: 503908
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F) ***
             Drug: AMPICILLIN 250MG CAP *** (N/F) ***
 (2)
 (3)
           *Dosage: 500 (MG)
              Verb: TAKE
     Dispense Units: 2
              Noun: CAPSULES
            *Route: ORAL
          *Schedule: QID
          *Duration: 10D (DAYS)
 (4) Pat Instructions: WITH FOOD AVOIDING DAIRY FOODS
              SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
                   WITH FOOD AVOIDING DAIRY FOODS
(5) Patient Status: SERVICE CONNECTED
         Enter ?? for more actions
DC Discontinue PR Partial
                                             RL Release
                       RF (Refill)
   Edit
                                               RN Renew
Select Action: Next Screen//
```

If a new order is created due to the editing of a field that affects copay, like Duration, the values previously entered display as defaults.

If editing the PATIENT STATUS field of a prescription results in a change to the copay status of that prescription, the copay status of the prescription is automatically updated and an entry made in the prescription Copay activity log.

```
Enter ?? for more actions
DC Discontinue PR Partial
                                              RL Release
   Edit
ED
                       RF Refill
                                                RN
                                                     Renew
Select Action: Next Screen// E Edit
Select fields by number: (1-18): 5
PATIENT STATUS: OPT NSC// AUT
      AUTH ABS +96
    1
       AUTH ABS -96
CHOOSE 1-2: 2 AUTH ABS -96
11 refills are greater than 0 allowed for AUTH ABS -96 Rx Patient Status.
The last fill has been released, do you want a reprint label? Y// NO
Patient Status field for this Rx has been changed from a COPAYMENT ELIGIBLE
patient status to a COPAYMENT EXEMPT patient status. The copay status of this Rx
will be automatically adjusted. If action needs to be taken to adjust charges
you MUST use the Reset Copay Status/Cancel Charges option.
```

-----example continues-----

If a starred field, like Dosage, is changed a new order will be created that will include a remark noting the original prescription number. Note that when the dosage is changed the dispense units per dose and quantity are recalculated.

Example: Editing an Order (continued)

```
Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 500// 750MG 750MG
You entered 750MG is this correct? Yes// <Enter> YES
VERB: TAKE// <Enter> TAKE
DISPENSE UNITS PER DOSE (CAPSULE(S)): 3// <Enter> 3
Dosage Ordered: 750MG
NOUN: CAPSULE(S)// < Enter > CAPSULE(S)
ROUTE: ORAL// <Enter> ORAL
Schedule: QID// <Enter> (FOUR TIMES A DAY)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 10D// <Enter> 10D (DAYS)
CONJUNCTION: <Enter>
New OP Order (ROUTINE) May 30, 2006 17:11:44
                                                            Page:
                                                                     1 of
OPPATIENT29, ONE
                                                                    <A>
                                                  Ht (cm): 175.26 (06/07/2000)
  PID: 000-87-6543
  DOB: SEP 12,1919 (81)
                                                  Wt(kg): 79.09 (06/07/2000)
      Orderable Item: AMPICILLIN CAP, ORAL ***(N/F) ***
       Drug: AMPICILLIN 250MG CAP *** (N/F) ***
  (1)
  (2) Patient Status: SERVICE CONNECTED
      Issue Date: MAY 30,2006
                                            (4) Fill Date: MAY 30,2006
  (5) Dosage Ordered: 750 (MG)
               Verb: TAKE
      Dispense Units: 3
               Noun: CAPSULE(S)
              Route: ORAL
           Schedule: QID
           *Duration: 10D (DAYS)
  (6) Pat Instruction: WITH FOOD AVOIDING DAIRY FOODS
                SIG: TAKE THREE CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10
                    DAYS WITH FOOD AVOIDING DAIRY FOODS
          This change will create a new prescription!
AC
   Accept
                                            Edit
Select Action: Next Screen//
New OP Order (ROUTINE)
                           May 30, 2006 17:15:09
                                                            Page:
                                                                     2 of
OPPATIENT29, ONE
                                                                      <A>
  PID: 000-87-6543
                                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)
                                                  Wt(kg): 79.09 (06/07/2000)
  (7)
        Days Supply: 10
                                            (8)
                                                  QTY (CAP): 120
  (9)
       # of Refills: 0
                                             (10) Routing: WINDOW
 (11)
            Clinic: OUTPT NURSE GREEN TEAM
 (12)
           Provider: OPPROVIDER4.TWO
                                             (13)
                                                  Copies: 1
 (14)
           Remarks: New Order Created by editing Rx # 503908.
                                           Entry Date: MAY 30,2006 17:11:44
  Entry By: OPPROVIDER4, TWO
          This change will create a new prescription!
AC Accept
                                       ED Edit
Select Action: Edit// AC
```

------example continues-----



If the DAYS SUPPLY field is edited, the QTY field is recalculated. If the QTY field is edited, the DAYS SUPPLY field value does not change, but a message is displayed warning the user of the change and recommending that the value be checked.

Example: Editing an Order (continued)

```
New OP Order (ROUTINE) May 31, 2006 12:57:06
                                                       Page:
                                                                2 of
OPPATIENT29, ONE
                                                               <A>
                                              Ht (cm): 175.26 (06/07/2000)
 PID: 000-87-6543
 DOB: SEP 12,1919 (81)
                                              Wt(kg): 79.09 (06/07/2000)
  (7)
      Days Supply: 30
                                         (8) QTY (CAP): 120
  (9)
       # of Refills: 0
                                         (10) Routing: WINDOW
           Clinic: OUTPT NURSE GREEN TEAM
 (11)
 (12)
         Provider: OPPROVIDER4, TWO (13) Copies: 1
       Remarks: New Order Created by editing Rx # 503910.
  Entry By: OPPROVIDER4, TWO
                             Entry Date: MAY 31,2006 12:57:06
         Enter ?? for more actions
AC Accept
                                    ED Edit
Select Action: Edit// <Enter> Edit
Select Field to Edit by number: (1-14): 7
DAYS SUPPLY: (1-90): 10// 7
```

Once changes are entered the screen redisplays with the changes and the order can be accepted or edited again. If the order is accepted, the prescription is checked for drug/drug interactions and, if none exist, prompts follow for nature of order and whether the patient was counseled.

```
Now doing drug interaction and allergy checks. Please wait...
Nature of Order: WRITTEN// ??
                            Require Print Print on
 Nature of Order Activity E.Signature Chart Copy Summary
 WRITTEN
                                                      Х
 VERBAL
                                                      X
 TELEPHONED
                               X
                                           Х
                                                      X
  SERVICE CORRECTION
  POLICY
                                            x
                                                       x
 DUPLICATE
 REJECTED
  SERVICE REJECT
Nature of Order: WRITTEN// <Enter> WRITTEN
WAS THE PATIENT COUNSELED: NO// Y YES
WAS COUNSELING UNDERSTOOD: NO// Y YES
```

If the drug or orderable item is edited, PROVIDER key users may be prompted for the appropriate ICD-9 Diagnosis Codes. User response is optional.

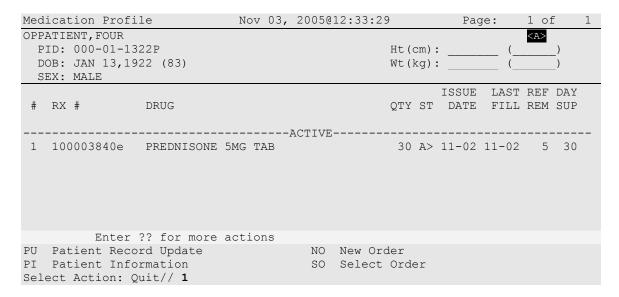
If prompted for ICD-9 Diagnosis Codes, the user can enter partial names and ICD-9 Diagnosis Code numbers or a valid Diagnosis Code number or name.

```
Mar 23, 2004@10:14:45
Patient Information
                                                                      1 of
OPPATIENT29, ONE
                                                                      <A>
  PID: 000-87-6543
                                                   Ht (cm): 175.26 (06/07/2000)
 DOB: SEP 12,1919 (81)
                                                    Wt(kg): 79.09 (06/07/2000)
Eligibility: SC LESS THAN 50% SC%: 10
RX PATIENT STATUS: SC LESS THAN 50%
Disabilities: BACK STRAIN-10% (SC), UPPER ARM CONDITION-0% (SC),
              CONDITION OF THE SKELETAL SYSTEM-0% (SC),
123 ANY STREET
                                                  HOME PHONE:
BIRMINGHAM
                                                  CELL PHONE:
ALABAMA
                                                  WORK PHONE:
Prescription Mail Delivery: Regular Mail
Allergies
   Verified: THEOPHYLLINE,
         Enter ?? for more actions
EA Enter/Edit Allergy/ADR Data PU Patient Record Update
DD Detailed Allergy/ADR List
DD Detailed Allergy/ADR List
                                        EX Exit Patient List
Select Action: Next Screen// <Enter>
Select Primary ICD-9 Code: neuropathy
    1 NEUROPATHY 337.1 AUT NEUROPTHY IN OTH DIS
     2 NEUROPATHY 356.2
                             HERED SENSORY NEUROPATHY
    3 NEUROPATHY 356.8 IDIO PERIPH NEURPTHY NEC
4 NEUROPATHY 356.9 IDIO PERIPH NEURPTHY NOS
5 NEUROPATHY 377.33 NUTRITION OPTC NEUROPTHY
Press <RETURN> to see more, '^' to exit this list, OR CHOOSE 1-5: 3 356.8 IDIO
PERIPH NEURPTHY NEC
Select Secondary ICD-9 Code: diabetes
    1 DIABETES 250.01 DIABETES MELLI W/O COMP TYP I COMPLICATION/CO
MORBIDITY
    2 DIABETES 250.11 DIABETES W KETOACIDOSIS TYPE I
                                                                 COMPLICATION/CO
MORBIDITY
    3 DIABETES 250.21 DIABETES W HYPEROSMOLAR TYPE I
                                                                 COMPLICATION/CO
MORBIDITY
    4 DIABETES 250.31 DIABETES W OTHER COMA TYPE I
                                                              COMPLICATION/CO
MORBIDITY
    5 DIABETES 250.41
                              DIABETES W RENAL MANIFES TYP I
                                                                  COMPLICATION/CO
MORBIDITY
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 1 250.01 DIABETES MELLI W/O COMP TYP I
                                                            COMPLICATION/COMORBIDITY
Select Secondary ICD-9 Code:
```

Editing an ePharmacy Order

When editing fields preceded by an asterisk (*) in an ePharmacy order (or electronically third party billable prescription), upon acceptance of the edited order the original prescription will be discontinued and a new order created. If the latest fill of the original order has not been released and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription.

If the original claim was E Payable, and edits are made to any of these fields – Provider, Qty, Days Supply, Division, Fill Date, NDC, or DAW Code – then the original payable claim is reversed and a new claim is submitted to ECME. If the original claim was rejected, then a reversal is not necessary, and a new claim is submitted to ECME.



Press **Enter>** twice to scroll to page 3 of the Medication Profile. Notice that a new field displays on the profile: DAW Code. DAW stands for "Dispense as Written" and refers to a set of ten NCPDP codes (0-9) that tells third party payers why a brand or generic product was selected to fill a prescription. When a new prescription is entered for a specific drug, the DAW code from the drug is stored in the PRESCRIPTION file (#52) for each fill. This field is solely being used for electronic billing purposes. It communicates to the third party payer that a drug has a special characteristic, which may prevent the payer from rejecting the claim. The available codes include:

Code Description

- 0 NO PRODUCT SELECTION INDICATED
- 1 SUBSTITUTION NOT ALLOWED BY PRESCRIBER
- 2 SUBSTITUTION ALLOWED-PATIENT REQUESTED PRODUCT DISPENSED
- 3 SUBSTITUTION ALLOWED-PHARMACIST SELECTED PRODUCT DISPENSED
- 4 SUBSTITUTION ALLOWED-GENERIC DRUG NOT IN STOCK
- 5 SUBSTITUTION ALLOWED-BRAND DRUG DISPENSED AS A GENERIC
- 6 OVERRIDE
- 7 SUBSTITUTION NOT ALLOWED-BRAND DRUG MANDATED BY LAW
- 8 SUBSTITUTION ALLOWED-GENERIC DRUG NOT AVAILABLE IN MARKETPLACE
- 9 OTHER

The DAW Code default is 0 – No Product Selection Indicated, unless the DAW Code has been set for this drug at the DRUG file level.

Enter **21** to edit the field.

Example: Editing an ePharmacy Order (continued)

```
OP Medications (ACTIVE)
                            Nov 03, 2005@12:51:52
                                                          Page:
OPPATIENT, FOUR
                                                                   <A>
  PID: 000-01-1322P
                                                 Ht (cm):
  DOB: JAN 13,1922 (83)
                                                 Wt(kg):
(19)
         Counseling: YES
                                             Was Counseling Understood: YES
(20)
        Refill Data
(21)
        DAW Code: 0 - NO PRODUCT SELECTION INDICATED
  Entry By: OPPHARMACIST4, THREE
                                                 Entry Date: 11/03/05 12:50:51
         Enter ?? for more actions
DC
    Discontinue PR Partial
                                                 RL
                                                      Release
    Edit
                        RF
                             Refill
                                                  RN
                                                      Renew
Select Action: Next Screen// 21
```

```
DAW CODE: 0// ??
Answer with BPS NCPDP DAW CODE
  Choose from:
         NO PRODUCT SELECTION INDICATED
           SUBSTITUTION NOT ALLOWED BY PRESCRIBER
   1
            SUBSTITUTION ALLOWED-PATIENT REQUESTED PRODUCT DISPENSED
   3
            SUBSTITUTION ALLOWED-PHARMACIST SELECTED PRODUCT DISPENSED
   4
            SUBSTITUTION ALLOWED-GENERIC DRUG NOT IN STOCK
   5
            SUBSTITUTION ALLOWED-BRAND DRUG DISPENSED AS A GENERIC
   6
            OVERRIDE
   7
            SUBSTITUTION NOT ALLOWED-BRAND DRUG MANDATED BY LAW
   8
            SUBSTITUTION ALLOWED-GENERIC DRUG NOT AVAILABLE IN MARKETPLACE
            OTHER
Dispensed As Written code. This information is used for electronic claim transmi
ssion to third party payers (insurance companies).
DAW CODE: 0// 5 - SUBSTITUTION ALLOWED-BRAND DRUG DISPENSED AS A GENERIC
Are You Sure You Want to Update Rx 100003853? Yes// <Enter>
```

The field is updated and displayed in the Medication Profile.

```
OP Medications (ACTIVE)
                             Nov 03, 2005@12:51:52
                                                            Page:
OPPATIENT, FOUR
                                                                     <A>
  PID: 000-01-1322P
                                                  Ht (cm):
  DOB: JAN 13,1922 (83)
                                                  Wt(kg):
(19)
                                              Was Counseling Understood: YES
         Counseling: YES
(20)
        Refill Data
          DAW Code: 0 - NO PRODUCT SELECTION INDICATED
(21)
  Entry By: OPPHARMACIST4, THREE
                                                  Entry Date: 11/03/05 12:50:51
         Enter ?? for more actions
DC
                      PR Partial
                                                   RL
                                                      Release
    Discontinue
                              Refill
ED
   Edit
                        RF
                                                   RN
                                                        Renew
Select Action: Quit/
New OP Order (ROUTINE) Nov 04, 2005@08:36:29
                                                            Page:
                                                                     2 of
OPPATIENT, FOUR
  PID: 000-01-1322P
                                                  Ht (cm):
  DOB: JAN 13,1922 (83)
                                                  Wt(kg):
        Days Supply: 30
                                                  QTY (TAB): 30
  (7)
                                            (8)
       # of Refills: 5
                                            (10) Routing: WINDOW
 (9)
 (11)
             Clinic:
           Provider: OPPROVIDER4, TWO
                                                      (13)
 (12)
                                                           Copies: 1
           Remarks: New Order Created by editing Rx # 100003840.
 (14)
  Entry By: OPPHARMACIST4, THREE
                                                Entry Date: NOV 4,2005 08:36:06
         This change will create a new prescription!
AC Accept
Select Action: Edit// AC Accept
Nature of Order: SERVICE CORRECTION//
                                       <Enter>
                                                   S
WAS THE PATIENT COUNSELED: NO// YES
WAS COUNSELING UNDERSTOOD: NO// YES
Do you want to enter a Progress Note? No// <Enter> NO
```

```
Rx # 100003852
                       11/04/05
OPPATIENT, FOUR
                                    #30
TAKE ONE TABLET BY BY MOUTH FOUR TIMES A DAY FOR 30 DAYS WITH FOOD
AVOIDING DAIRY FOODS
PREDNISONE 5MG TAB
OPPROVIDER4, TWO
                           OPPHARMACIST4, THREE
# of Refills: 5
Is this correct? YES// <Enter> YES...
Claim has status E REJECTED. Not reversed.
Prescription 100003852 successfully submitted to ECME for claim generation.
Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE
```

DAW/NDC Edit

The Dispensed As Written(DAW)/National Drug Code (NDC) field for discontinued and expired orders can be edited.

For ePharmacy prescriptions, the DAW/NDC field for discontinued and expired orders can be edited. The following statuses are editable.

- 11 EXPIRED
- 12 DISCONTINUED
- 14 DISCONTINUED BY PROVIDER
- 15 DISCONTINUED (EDIT).

Status's 14 and 15 above result from the prescription being discontinued from CPRS. For status 14 - DISCONTINUED BY PROVIDER, the user can choose to discontinue the prescription in CPRS by selecting "Requesting Physician Cancelled" for the reason.

The following is an example of the activity log entry stored on the prescription for this type of discontinue:

```
1 06/20/08 DISCONTINUED ORIGINAL OPPHARM, ONE Comments: Discontinued by OE/RR.
```

For status 15 - DISCONTINUED (EDIT), the user can edit a prescription in CPRS which discontinues the prescription being edited resulting in status 15 in the Outpatient Pharmacy package. The following is an example of the activity log entry on the prescription in OP:

```
2 06/05/08 DISCONTINUED ORIGINAL OPHARM, ONE Comments: Discontinued due to CPRS edit
```

Using the Copy Action

If a double question mark (??) had been entered at the "Select Action:"prompt, the following hidden actions would display in the action area.

```
The following actions are also available:

AL Activity Logs (OP) OTH Other OP Actions FS First Screen

VF Verify (OP) REJ View REJECT GO Go to Page

CO Copy (OP) DIN Drug Restr/Guide (OP) LS Last Screen

RP Reprint (OP) + Next Screen PS Print Screen

HD Hold (OP) - Previous Screen PT Print List

UH Unhold (OP) < Shift View to Left QU Quit

PI Patient Information > Shift View to Right RD Re Display Screen

PP Pull Rx (OP) ADPL Auto Display(On/Off) SL Search List

IP Inpat. Profile (OP) DN Down a Line UP Up a Line
```

Copy is a hidden action used to copy an order and edit any field.

Example: Copying an Order

Medication Profile	Jun 04,	2006 15	5:49:09	Page:	1 of	1	
OPPATIENT6, ONE					<a>		
PID: 000-13-5790			Ht(cm)	: 175.26	(08/10/20	04)	
DOB: FEB 8,1922 (79)			Wt(kg)	: 75.45	(08/10/200	4)	
				ISSUE	LAST REF	' DAY	
# RX # DRUG			QTY	ST DATE	FILL REM	SUP	
	A	CTIVE					
1 503911\$ AMPICILLIN 2	250MG CAP		80	A 05-25	06-01	10	
2 503901 LISINOPRIL 1	OMG TAB		150	A> 05-17	05-17 2	30	
Enter ?? for more a	actions						
PU Patient Record Update		NO N	New Order				
PI Patient Information		SO S	Select Order				
Select Action: Quit// so Select Order [Or enter the order number here, e.g. 1]							
Select Orders by number: (1-	-2): 1		_		_	•	

Remember that actions in parentheses, like Refill in this example, are not available for the order.

-----example continues------

Example: Copying an Order (continued)

```
OP Medications (ACTIVE)
                             Jun 04, 2006 15:50:49
                                                            Page: 1 of 3
OPPATIENT6, ONE
                                                                     <A>
  PID: 000-13-5790
                                                  Ht (cm): 175.26 (08/\overline{10/2004})
  DOB: FEB 8,1922 (79)
                                                  Wt(kg): 75.45 (08/10/2004)
               Rx #: 503911$
 (1) *Orderable Item: AMPICILLIN CAP,ORAL *** (N/F) ***
 (2)
               Drug: AMPICILLIN 250MG CAP *** (N/F) ***
 (3)
            *Dosage: 500 (MG)
               Verb: TAKE
      Dispense Units: 2
               Noun: CAPSULES
             *Route: ORAL
           *Schedule: OID
 (4) Pat Instructions: Prov Comments
  Provider Comments: Prov Comments
                SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV COMMENTS
 (5) Patient Status: OUTPT NON-SC
 (6) Issue Date: 05/25/01
                                        (7) Fill Date: 06/01/01
         Enter ?? for more actions
DC
    Discontinue PR Partial
                                                   RL
                                                        Release
ED
    Edit
                         RF
                              (Refill)
                                                   RN
                                                        Renew
Select Action: Next Screen//CO
```

Once "Copy" is entered, the heading on the screen changes to "New OP Order (COPY)" and the available actions are limited to "Edit" or "Accept."

```
New OP Order (COPY) Jun 04, 2006 15:51:32
                                                                1 of
OPPATIENT6, ONE
                                                                <A>
  PID: 000-13-5790
                                               Ht(cm): 175.26 (08/10/2004)
  DOB: FEB 8,1922 (79)
                                               Wt(kg): 75.45 (08/10/2004)
     Orderable Item: AMPICILLIN CAP, ORAL *** (N/F) ***
             Drug: AMPICILLIN 250MG CAP ***(N/F) ***
  (1)
  (2) Patient Status: OUTPT NON-SC
                                        (4) Fill Date: JUN 4,2006
     Issue Date: JUN 4,2006
  (5) Dosage Ordered: 500 (MG)
              Verb: TAKE
     Dispense Units: 2
              Noun: CAPSULES
             Route: ORAL
           Schedule: QID
  (6) Pat Instruction: Prov Comments
               SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV
                    COMMENTS
        Days Supply: 10
                                         (8) QTY (CAP): 80
         Enter ?? for more actions
AC Accept
                                    ED
                                         Edit
Select Action: Next Screen// AC
                             Accept
-----example continues------
```

Once the copied order is accepted, the previous order information displays and the user is asked whether to discontinue the original order.

If the orderable item or drug is edited, PROVIDER key users may be prompted for the appropriate ICD-9 Diagnosis Codes. User response is optional.

If prompted for ICD-9 Diagnosis Codes, the user can enter partial names and ICD-9 Diagnosis Code numbers or a valid Diagnosis Code number or name.

```
Mar 23, 2004@10:14:45
Patient Information
                                                                       1 of
OPPATIENT6, ONE
                                                                       <A>
  PID: 000-13-5790
                                                    Ht (cm): 175.26 (08/10/2004)
  DOB: FEB 8,1922 (79)
                                                    Wt(kg): 75.45 (08/10/2004)
Eligibility: SC LESS THAN 50%
RX PATIENT STATUS: SC LESS THAN 50%
Disabilities: BACK STRAIN-10% (SC), UPPER ARM CONDITION-0% (SC),
             CONDITION OF THE SKELETAL SYSTEM-0% (SC),
123 ANY STREET
                                                  HOME PHONE:
BIRMINGHAM
                                                  CELL PHONE:
ALABAMA
                                                  WORK PHONE:
Prescription Mail Delivery: Regular Mail
Allergies
   Verified: THEOPHYLLINE,
         Enter ?? for more actions
EA Enter/Edit Allergy/ADR Data PU Patient Record Update
DD Detailed Allergy/ADR List
DD Detailed Allergy/ADR List
                                        EX Exit Patient List
Select Action: Next Screen// <Enter>
Select Primary ICD-9 Code: neuropathy
    1 NEUROPATHY 337.1 AUT NEUROPTHY IN OTH DIS
     2 NEUROPATHY 356.2
                             HERED SENSORY NEUROPATHY
    3 NEUROPATHY 356.8 IDIO PERIPH NEURPTHY NEC
4 NEUROPATHY 356.9 IDIO PERIPH NEURPTHY NOS
5 NEUROPATHY 377.33 NUTRITION OPTC NEUROPTHY
Press <RETURN> to see more, '^' to exit this list, OR CHOOSE 1-5: 3 356.8 IDIO
PERIPH NEURPTHY NEC
Select Secondary ICD-9 Code: diabetes
    1 DIABETES 250.01 DIABETES MELLI W/O COMP TYP I COMPLICATION/CO
MORBIDITY
    2 DIABETES 250.11 DIABETES W KETOACIDOSIS TYPE I
                                                                 COMPLICATION/CO
MORBIDITY
    3 DIABETES 250.21 DIABETES W HYPEROSMOLAR TYPE I
                                                                 COMPLICATION/CO
MORBIDITY
    4 DIABETES 250.31 DIABETES W OTHER COMA TYPE I
                                                              COMPLICATION/CO
MORBIDITY
    5 DIABETES 250.41
                              DIABETES W RENAL MANIFES TYP I
                                                                  COMPLICATION/CO
MORBIDITY
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 1 250.01 DIABETES MELLI W/O COMP TYP I
                                                            COMPLICATION/COMORBIDITY
Select Secondary ICD-9 Code:
```

ICD-9 Diagnosis Codes from copied, edited, or renewed prescriptions will carry forward as default answers.

Example: Copying an Order (continued)

```
_____
DUPLICATE DRUG AMPICILLIN 250MG CAP in Prescription: 503911
             Status: Active
                                               Issued: 05/25/01
    Processing Status: Released locally on 06/01/01@11:34:13 (Mail)
                SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV
                    COMMENTS
           # of refills: 0
Provider: OPPROVIDER4, TWO Refills remaining: 0
                                      Last filled on: 06/01/01
                                        Days Supply: 10
               ______
Discontinue Rx # 503911? YES
Duplicate Drug will be discontinued after the acceptance of the new order.
Now doing order checks. Please wait...
Nature of Order: WRITTEN// <Enter>
WAS THE PATIENT COUNSELED: NO// <Enter> NO
Do you want to enter a Progress Note? No// <Enter> NO
```

The new order information is displayed and, if it is verified as correct, the old order is discontinued.

```
Rx # 503913 06/04/01
OPPATIENT6,ONE #80
TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV COMMENTS

AMPICILLIN 250MG CAP
OPPROVIDER4,TWO OPPHARMACIST4,THREE
# of Refills: 0

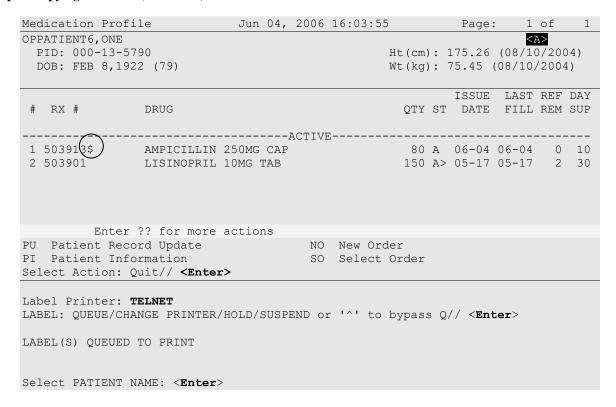
Is this correct? YES// <Enter>...
-Rx 503911 has been discontinued...

SC Percent: 10%
Disabilities:
PROSTATE GLAND CONDITION 10% - SERVICE CONNECTED
INGUINAL HERNIA 0% - SERVICE CONNECTED
Was treatment for Service Connected condition? NO// <Enter>
Is this correct? YES// <Enter>...
```

-----example continues-----

The Medication Profile screen is redisplayed at this point. The dollar sign next to the first prescription number means a copay charge is associated with that order.

Example: Copying an Order (continued)

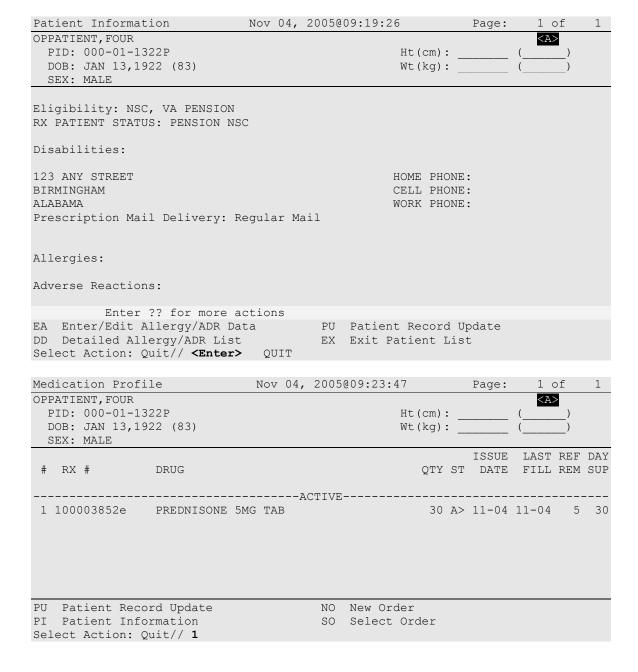


The label displays the copay status of the prescription except for a partial fill.

Copying an ePharmacy Order

When copying an ePharmacy order, upon acceptance of the copied order the original prescription will be discontinued and a new order created. If the latest fill of the original order has not been released and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription.

Example: Copying an ePharmacy Order



Medication Profile OPPATIENT, FOUR	Nov 04,	2005@09:24:04	:	Page:	1 c	f 1
•			II+ (am) .		(A)	1
PID: 000-01-1322P			Ht (cm):		(_',
DOB: JAN 13,1922 (83)			Wt(kg):		()
SEX: MALE						
						REF DAY
# RX # DRUG			QTY S	T DATE	FILL	REM SUF
		ACTIVE				
OP Medications (ACTIVE)	Nov 04,	2005@09:24:1	.7	Page		of 3
OPPATIENT, FOUR					<a>	
PID: 000-01-1322P			Ht(cm):		(_)
DOB: JAN 13,1922 (83)			Wt(kg):		()
Rx #: 1000038	52e					
(1) *Orderable Item: PREDNIS	ONE TAB					
(2) CMOP Drug: PREDNIS	ONE 5MG	ГАВ				
(3) *Dosage: 20 (MG)						
Verb: TAKE						
Dispense Units: 1						
Noun: TABLET						
*Route: ORAL						
*Schedule: OID						
*Duration: 30 (DAY	(2)					
(4) Pat Instructions: WITH FO	•	ING DATRY FOOD	ng			
		BY BY MOUTH F		יפ א האע	EUD 30	DVAC
		ING DAIRY FOOD		IS A DAI	ron so	DAIS
		ING DAIRI FOOD	15			
(5) Patient Status: OPT NSC						
Enter ?? for more a	a+ i ana					
			RL Re	10000		
	Refill	<u> </u>				
Select Action: Next Screen//			RN Re	new		

Once "Copy" is entered, the heading on the screen changes to "New OP Order (COPY)" and the available actions are limited to "Edit" or "Accept."

New OP Order (COPY)	Nov 04, 20	05@09:24:17	Page:	1 of	2
OPPATIENT, FOUR				<A $>$	
PID: 000-01-1322P		Ht(cm):	(_)	
DOB: JAN 13,1922 (8	3)	Wt(kg):	()	
Orderable Item:	PREDNISONE TAB				
(1) CMOP Drug:	PREDNISONE 5MG TAB				
(2) Patient Status:	OPT NSC				
(3) Issue Date:	NOV 4,2005	(4) Fill Date:	NOV 4,200	5	
(5) Dosage Ordered:	20 (MG)				
Verb:	TAKE				
Dispense Units:	1				
Noun:	TABLET				
Route:	ORAL				
Schedule:	QID				
*Duration:	30 (DAYS)				
(6) Pat Instruction:	WITH FOOD AVOIDING	DAIRY FOODS			
SIG:	TAKE ONE TABLET BY	BY MOUTH FOUR TIME	S A DAY FO	R 30	
	DAYS WITH FOOD AVO	IDING DAIRY FOODS			
+ Enter ?? fo	r more actions				
AC Accept		ED Edit			
Select Action: Next S	Screen// AC Accept				

```
DUPLICATE DRUG PREDNISONE 5MG TAB in Prescription: 100003852
                Status: Active
                                                      Issued: 11/04/05
     Processing Status: Released locally on 11/04/05@11:34:13 (Mail)
                  SIG: TAKE ONE TABLET BY BY MOUTH FOUR TIMES A DAY FOR 30
                       DAYS WITH FOOD AVOIDING DAIRY FOODS
                  QTY: 30
                                                # of refills: 5
              Provider: OPPROVIDER4, TWO Refills remaining: 5
                                             Last filled on: 11/04/05
                                                Days Supply: 30
Discontinue Rx # 100003852? YES
Duplicate Drug will be discontinued after the acceptance of the new order.
Now doing order checks. Please wait...
Nature of Order: WRITTEN// <Enter>
WAS THE PATIENT COUNSELED: NO// YES
WAS COUNSELING UNDERSTOOD: NO// YES
Do you want to enter a Progress Note? No// <Enter> NO
Rx # 100003853
                     11/04/05
OPPATIENT, FOUR
                                  #30
TAKE ONE TABLET BY BY MOUTH FOUR TIMES A DAY FOR 30 DAYS WITH FOOD
AVOIDING DAIRY FOODS
PREDNISONE 5MG TAB
OPPROVIDER4, TWO
                        OPPHARMACIST4, THREE
# of Refills: 5
Is this correct? YES// YES...
Reversing prescription 100003852.
Claim Status:
Reversing and Rebilling a previously submitted claim...
Reversing...
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Waiting to process response
E REVERSAL ACCEPTED
 -Rx 100003852 has been discontinued...
Prescription 100003853 successfully submitted to ECME for claim generation.
Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE
```

View of RX:

Medication Profile	Nov 04,	2005@	09:25:14	Page:	1 0	f	1
OPPATIENT, FOUR PID: 000-01-1322P DOB: JAN 13,1922 (83) SEX: MALE			Ht(cm): _ Wt(kg): _		(_)	
# RX # DRUG			~	ISSUE DATE	LAST FILL		
1 100003853e PREDNISONE	<i>₽</i> 5MG TAB	ACTIVE		11-04	11-04	5	30
Enter ?? for more	actions						
PU Patient Record Update PI Patient Information Select Action: Quit//		NO SO	New Order Select Order				

Renewing a Prescription

This action allows the pharmacy manager, pharmacist, or pharmacy technician to process renewals for existing orders.

Example: Renewing a Prescription

[This example begins after an order is selected from the Medication Profile screen.]

```
1 of
OP Medications (ACTIVE) Jun 04, 2006 16:14:40
OPPATIENT29, ONE
  PID: 000-87-6543
                                                 Ht (cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)
                                                 Wt(kg): 79.09 (06/07/2000)
             Rx #: 503910
 (1) *Orderable Item: AMPICILLIN CAP, ORAL *** (N/F) ***
               Drug: AMPICILLIN 250MG CAP *** (N/F) ***
 (2)
 (3)
            *Dosage: 500 (MG)
               Verb: TAKE
     Dispense Units: 2
               Noun: CAPSULES
             *Route: ORAL
          *Schedule: QID
          *Duration: 10D (DAYS)
 (4) Pat Instructions: with food
                SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
                     WITH FOOD
 (5) Patient Status: SERVICE CONNECTED
       Enter ?? for more actions
DC Discontinue PR Partial
                                                  RI. Release
                             (Refill)
   Edit
                        RF
                                                  RN Renew
Select Action: Next Screen// RN Renew
FILL DATE: (6/4/2006 - 7/4/2006): TODAY// <Enter> (JUN 04, 2006)
MAIL/WINDOW: WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: <Enter>
Nature of Order: WRITTEN// <Enter>
WAS THE PATIENT COUNSELED: NO// <Enter> NO
Do you want to enter a Progress Note? No// <Enter> NO
Now Renewing Rx # 503910 Drug: AMPICILLIN 250MG CAP
Now doing order checks. Please wait...
503910A
           AMPICILLIN 250MG CAP
                                             QTY: 80
# OF REFILLS: 0 ISSUED: 06-04-01
SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS WITH FOOD
FILLED: 06-20-01
ROUTING: WINDOW
                  PHYS: OPPROVIDER4, TWO
Edit renewed Rx ? Y// <Enter> ES
```

-----example continues-----

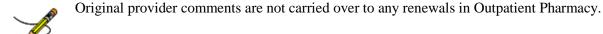
Example: Renewing a Prescription (continued)

(To save space, only the second Prescription Renew screen is displayed in this example.)

```
Prescription Renew
                               Jun 04, 2006 16:18:17
                                                                         2 of
                                                               Page:
OPPATIENT29, ONE
                                                                        <A>
  PID: 000-87-6543
                                                     Ht (cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)
                                                     Wt(kg): 79.09 (06/07/2000)
                 SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
                       WITH FOOD
         Days Supply: 30
                 QTY (CAP): 80
  (3)
        # of Refills: 0
  (4)
             Routing: WINDOW
  (5)
              Clinic: OUTPT NURSE GREEN TEAM
  (6)
            Provider: OPPROVIDER4, TWO
  (7)
              Copies: 1
             Remarks: RENEWED FROM RX # 503910
  (8)
  Entry By: OPPROVIDER4, TWO
                                                  Entry Date: JUN 4,2006 16:16:27
          Enter ?? for more actions
AC
     Accept
                                         DC
                                               Discontinue
                                         ΕD
                                               Edit
BY
     Bypass
                             Edit [Or enter the field(s), e.g., 1,5,7]
Select Item(s): Quit// ED
Select Field to Edit by number: (1-8): 5
CLINIC: OUTPT NURSE GREEN TEAM //OUT
         OUTPT NURSE BLUE TEAM
     2
         OUTPT NURSE GREEN TEAM
     3
        OUTPT NURSE YELLOW TEAM
CHOOSE 1-3: 1 OUTPT NURSE BLUE TEAM
```

The user may renew more than one order on the same patient by typing the desired order numbers separated by a comma (for example: 1,3,5).

```
Jun 04, 2006 16:24:32
                                                                        2 of
Prescription Renew
                                                               Page:
OPPATIENT29, ONE
                                                     Ht(cm): 175.26 (06/07/2000)
  PID: 000-87-6543
  DOB: SEP 12,1919 (81)
                                                     Wt(kg): 79.09 (06/07/2000)
                 SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
                      WITH FOOD
         Days Supply: 30
                 QTY (CAP): 80
  (3)
        # of Refills: 0
  (4)
             Routing: WINDOW
              Clinic: OUTPT NURSE BLUE TEAM
  (5)
  (6)
            Provider: OPPROVIDER4, TWO
  (7)
              Copies: 1
  (8)
             Remarks: RENEWED FROM RX # 503910
  Entry By: OPPROVIDER4, TWO
                                                 Entry Date: JUN 4,2006 16:23:56
          Enter ?? for more actions
                                         DC
                                              Discontinue
AC
     Accept
                                         ΕD
                                              Edit
BY
     Bypass
Select Item(s): Quit// AC Accept
RX# 503910A has been suspended until 06-20-01.
```



Renewing an ePharmacy Order

When renewing an ePharmacy order, upon acceptance of the renewed order the original prescription will be discontinued and a new order created. If the latest fill of the original order has not been released and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription.

[This example begins after an order is selected from the Medication Profile screen.]

```
OP Medications (ACTIVE) Nov 04, 2005@11:48:14 Page: 1 of 3
OPPATIENT, FOUR
  PID: 000-01-1322P
                                                  Ht (cm): __
  DOB: NOV 12,1975 (29)
                                                  Wt(kg):
              Rx #: 100003642$e
 (1) *Orderable Item: SIMETHICONE TAB, CHEWABLE
              Drug: SIMETHICONE 40MG TAB
 (2)
 (3)
           *Dosage: 40 (MG)
              Verb: CHEW
     Dispense Units: 1
               Noun: TABLET
             *Route: ORAL
           *Schedule: TID
 (4) Pat Instructions:
                SIG: CHEW ONE TABLET BY BY MOUTH THREE TIMES A DAY
 (5) Patient Status: OPT NSC
                                         (7) Fill Date: 08/11/05
 (6) Issue Date: 08/11/05
     Last Fill Date: 08/11/05 (Window)
        Enter ?? for more actions
DC Discontinue PR Partial RL Release ED Edit RF Refill RN Renew Select Action: Next Screen// RN Renew
FILL DATE: (11/4/2005 - 11/5/2006): TODAY// <Enter> (NOV 04, 2005)
MAIL/WINDOW: WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: < Enter>
Nature of Order: WRITTEN// <Enter>
WAS THE PATIENT COUNSELED: NO//<Enter> NO
Now Renewing Rx # 100003642 Drug: SIMETHICONE 40MG TAB
Now doing order checks. Please wait...
100003642A SIMETHICONE 40MG TAB
                                            QTY: 90
# OF REFILLS: 5 ISSUED: 11-04-05
SIG: CHEW ONE TABLET BY BY MOUTH THREE TIMES A DAY
FILLED: 11-04-05
ROUTING: WINDOW
                  PHYS: OPPROVIDER4, TWO
Edit renewed Rx ? Y// <Enter> ES
```

-----example continues-----

Example: Renewing an ePharmacy Order (continued)

(To save space, only the second Prescription Renew screen is displayed in this example.)

```
Prescription Renew Jun 04, 2006 16:18:17
                                                          Page:
                                                                   2 of
OPPATIENT, FOUR
                                                  Ht(cm): ___
  PID: 000-01-1322P
                                                 Wt(kg): __
  DOB: NOV 12,1975 (29)
        Days Supply: 30
                QTY ( ): 90
  (3)
       # of Refills: 5
          Routing: WINDOW
  (4)
  (5)
             Clinic:
           Provider: OPPROVIDER4, TWO
  (6)
  (7)
             Copies: 1
           Remarks: RENEWED FROM RX # 100003642
  (8)
  Entry By: OPPHARMACIST4, THREE
                                                 Entry Date: NOV 4,2005
11:56:31
         Enter ?? for more actions
AC Accept
                                     DC Discontinue
                                      ED
                                           Edit
BY
   Bypass
Select Item(s): Quit// 5
CLINIC: 3EN
Prescription Renew
                           Jun 04, 2006 16:24:32
                                                          Page:
                                                                   2 of
OPPATIENT, FOUR
                                                  Ht(cm): ___
  PID: 000-01-1322P
  DOB: NOV 12,1975 (29)
                                                 Wt(kg):
        Days Supply: 30
               QTY ( ): 90
        # of Refills: 5
  (3)
  (4)
           Routing: WINDOW
             Clinic: 3EN
  (5)
  (6)
           Provider: OPPROVIDER4, TWO
  (7)
            Copies: 1
            Remarks: RENEWED FROM RX # 100003642
  (8)
  Entry By: OPPHARMACIST4, THREE
                                               Entry Date: NOV 4,2005 11:56:31
         Enter ?? for more actions
AC
  Accept
                                      DC Discontinue
BY Bypass
                                         Edit
                                      ED
Select Item(s): Quit// AC Accept
       SC Percent: 40%
     Disabilities: NONE STATED
Was treatment for Service Connected condition? NO// <Enter>
```

Example: Renewing an ePharmacy Order (continued)

```
Reversing prescription 100003642.

Claim Status:
Reversing and Rebilling a previously submitted claim...
Reversing...
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Waiting to process response
E REVERSAL ACCEPTED

-Rx 100003642 has been discontinued...
```

```
Prescription 100003642A successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Receiving response
E PAYABLE
```



Original provider comments are not carried over to any renewals in Outpatient Pharmacy.

Flagging and Unflagging a New Pending Order

Flagging a pending order allows you to prevent an order from processing and attach a note known as a flag to the pending order. After the flag has been addressed, you unflag the order, allowing it to be processed. Note that only new pending orders can be flagged.

The following provides examples of how to flag and unflag a pending order from a medication profile within *Patient Prescription Processing*.

If a pending order is flagged, the row number is highlighted on the Medication Profile screen (shown in the following example). Select the order to view the flag or to flag the new pending order.

Example: A Flagged Pending Order

```
Medication Profile Mar 13, 2008@16:31:24 Page: 1 of 1
OPPATIENT16, ONE
                                      <NO ALLERGY ASSESSMENT>
                                        Ht (cm): 17\overline{7.80} (02/08/2007)
 PID: 000-24-6802
 DOB: APR 3,1941 (66)
                                       Wt(kg): 90.45 (02/08/2007)
 SEX: MALE
                                              ISSUE LAST REF DAY
# RX #
                                         QTY ST DATE FILL REM SUP
            DRUG
   -----ACTIVE-----
1 100002518 PENICILLAMINE 250MG TAB
                                   31 A 02-29 02-29 5 31
  -----PENDING------
2 ACETAMINOPHEN 500MG TAB QTY: 60 ISDT: 03-13 REF: 3
       Enter ?? for more actions
PU Patient Record Update NO New Order PI Patient Information SO Select Order
Select Action: Quit// SO Select Order
Select Orders by number: (1-2): 2
```

From the Pending OP Orders screen, you can flag and unflag an order, as well as view the flagged reason. To flag the order, enter **FL** and then enter a "REASON FOR FLAG", alert the proper individual that the flag has been added by pressing **Enter**> to select the default name or entering a different user name and pressing **Enter**>, and the flagging process is complete.

Example: Flagging an Order

```
REASON FOR FLAG: DOUBLE CHECK WITH PATIENT FOR HEART CONDITION BEFORE DISPENSING.

Send alert to: PSOUSER, ONE// BIRMINGHAM ALABAMA OP PHARMACIST ... order flagged.
```

When an order is flagged, "FL-" is placed in front of "Pending OP Orders" in the upper left corner, and the flagged reason is listed below the patient identifying information.

Example: A Flagged Order

```
FL-Pending OP Orders (ROUTINE) March 13, 2008 16:31:33
                                                            Page:
OPPATIENT16, ONE
                                                <NO ALLERGY ASSESSMENT>
  PID: 000-24-6802
                                                 Ht(cm): 177.80 (02/08/2007)
  DOB: APR 3,1941 (66)
                                                 Wt(kg): 90.45 (02/08/2007)
Flagged by OPPHARM, TWO on 03/13/08@23:14: DOUBLE CHECK WITH PATIENT FOR HEART
CONDITION BEFORE DISPENSING.
                                               * Editing starred fields will
*(1) Orderable Item: ACETAMINOPHEN TAB
 (2)
       CMOP Drug: ACETAMINOPHEN 500MG TAB
                                                 create a new order
      Drug Message: NATL FORM
           *Dosage: 500 (MG)
 (3)
              Verb: TAKE
    Dispense Units: 1
            *Route: ORAL
         *Schedule: BID
 (4) Pat Instruct:
 Provider Comments: ProvComments
              SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
 (5) Patient Status: SERVICE CONNECTED
       Issue Date: MAR 13,2008 (7) Fill Date: MAR 13,2008
      Days Supply: 30
                                  (9) QTY (TAB): 60
        Enter ?? for more actions
BY Bypass
                      DC Discontinue
                                                FL Flag/Unflag
ED Edit
                        FN Finish
Select Item(s): Next Screen// FL Flag/Unflag
```

To unflag an order, enter **FL** at the "Select Item(s)" prompt, and then enter your "COMMENTS". When you press **<Enter>**, the order is no longer flagged.

Example: Unflagging an Order

```
FLAGGED: 03/13 23:14 by OPPHARM, TWO

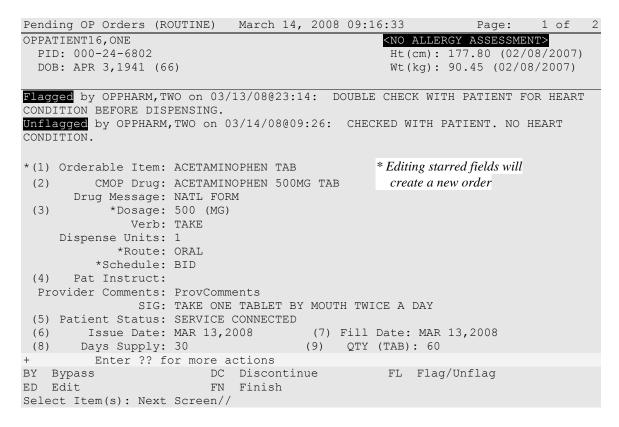
DOUBLE CHECK WITH PATIENT FOR HEART CONDITION BEFORE DISPENSING.

COMMENTS: CHECKED WITH PATIENT. NO HEART CONDITION.

... order unflagged.
```

At that point, the flag from the Medication Profile is removed, but the flagged/unflagged reason remains on the Pending OP Orders screen unless you reflag the order.

Example: An Unflagged Order



After pending orders have been unflagged, they can be processed.



If you attempt to process a flagged order, you are prompted "Unflag Order? NO//". If you respond **YES**, enter comments to unflag the order and continue with processing. If you respond **NO**, you cannot process the order because it is still flagged.

Barcode Rx Menu

[PSO BARCODE MENU]

Use this menu to batch barcode refills and renewals of prescriptions, and check the quality of the barcode print. The menu contains the following options:

- Barcode Batch Prescription Entry
- Check Quality of Barcode
- Process Internet Refills

Barcode Batch Prescription Entry[PSO BATCH BARCODE]

Enter refills or renewals by batch entry using barcodes with this option.

Example: Barcode Batch Prescription Entry -- Refills

```
Select Barcode Rx Menu Option: Barcode Batch Prescription Entry

Select one of the following:

1 REFILLS
2 RENEWS

Batch Barcode for: REFILLS// 1 REFILLS
Please answer the following for this session of prescriptions

FILL DATE: (2/14/2007 - 12/31/2699): TODAY// <Enter> (AUG 13, 2007)

MAIL/WINDOW: MAIL// <Enter> MAIL
Will these refills be Queued or Suspended ? S// <Enter> USPENDED
Allow refills for inpatient ? N// <Enter> O
Allow refills for CNH ? N// <Enter> O
WAND BARCODE: [Scan barcode]t
```

Check Quality of Barcode [PSO BARCODE CHECK]

No action is taken on the prescription by using this option. Use this option to check the quality of printed barcodes or use it to practice using the barcode reader. After the barcode is scanned, the barcode number will echo back on the screen and screen will return to the "Read Barcode" prompt. No action is taken on the prescription by using this option.

The following are some common causes for failure of the barcode reader and how they can be corrected.

- Barcode too faint (change printer ribbon)
- Improper scanning (move the wand at a steady rate)
- Defective barcode reader (replace the reader)

Process Internet Refills [PSO INTERNET REFILLS]

This option allows the pharmacist to process prescription orders entered on the Internet through My Health_eVet. The system will prompt the user for the information as shown in the following example. The user enters the appropriate response for each prompt by pressing **Enter** on the keyboard to accept the default setting for a prompt. The user must type the appropriate word or letter to enter a response contrary to the default.



The recommended usage of this option is three times a day to ensure the requested refills are processed in a timely manner. Or, the *Automate Internet Refill* option, located on the Maintenance (Outpatient Pharmacy) menu, may be set up to schedule a background job for automatically processing Internet refills.

Example: Process Internet Refills Screen

```
Division: ALBANY

Please answer the following for this session of prescriptions

FILL DATE: (1/28/2005 - 12/31/2699): TODAY// <Enter> (AUG 11, 2005)

MAIL/WINDOW: MAIL// <Enter> MAIL

Will these refills be Queued or Suspended? Q// S <Enter> USPENDED

Allow refills for inpatient ? N// <Enter> O

Allow refills for CNH ? N//<Enter> O

Allow early refills? N// <Enter> O

Process internet refill requests at this time? YES// <Enter> YES

Process internet refills for all divisions? NO// <Enter> O
```

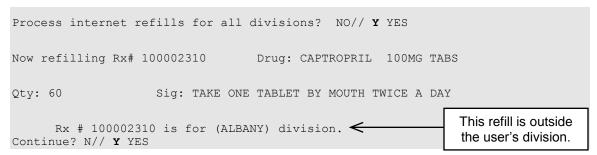
Users can process refills for their division or all divisions within a site. However, sites can set parameters in the PHARMACY SYSTEM file for the INTERDIVISIONAL PROCESSING and DIVISION PROMPT ASKED fields that control responses to user input on the Process Internet Refills screen. Note that site control parameters override any entries made by the user in the Process Internet Refills screen.

If the INTERDIVISIONAL PROCESSING parameter is set to **No**, only the refills for the user's division will be filled, regardless of the user's input at the "Process internet refills for all divisions?" prompt.

If the INTERDIVISIONAL PROCESSING parameter is set to **Yes** and the DIVISION PROMPT ASKED parameter is set to **No**, then the refill orders are processed for all divisions without any additional user input.

If the INTERDIVISIONAL PROCESSING parameter is set to **Yes** and the DIVISION PROMPT ASKED parameter is set to **Yes**, refills for the user's division will be processed without any additional input. If unprocessed refills outside the user's division exist, the "Continue?" prompt displays, allowing the user to confirm each refill, as shown in the following example.

Example: Process Internet Refills for all Divisions?



If the user enters Yes at the "Continue?" prompt, the refill will be processed.

If the user enters No at the "Continue?" prompt, the refill will not process at this time, and the refill request will remain in the PRESCRIPTION REFILL REQUEST file. These refill requests may be processed later by a user in the same division, or any division, depending on the PHARMACY SYSTEM file parameters.

Refills processed successfully are flagged as FILLED in the RESULTS field of the PRESCRIPTION REFILL REQUEST file.

Refills not processed due to conditions such as: Rx Expired, Discontinued, On Hold, or Deleted, are flagged as NOT FILLED in the RESULTS field of PRESCRIPTION REFILL REQUEST file.

Complete Orders from OERR [PSO LMOE FINISH]

When a clinician has created an order for a patient, the pharmacist needs to finish and verify the order. This option is used to finish orders entered into the patient record via Order Entry Results Reporting (OERR) V. 3.0. This option uses the List Manager features.

The user may select orders by patient, route, clinic, flag, or priority. Clinic or Clinic Sort Group can complete orders. In any sort, orders are completed on a first-in/first-out basis by patient. Clinic Sort Groups can be added or edited in the *Enter/Edit Clinic Sort Groups* option, found under the *Maintenance (Outpatient Pharmacy)* menu option. Orders entered before implementation of patch PSO*7*46 (Pharmacy Ordering Enhancements (POE)) must have the fields used to build the Sig filled in before processing can be completed.

Enter "E" at the "Select By:" prompt to stop processing orders.

If a temporary address has no end date, the following text is now displayed: "(Temp address from XXX 99,9999 till (no end date))".

For ePharmacy orders, after an order is finished, the billing data is sent to ECME, which sends a message back to Outpatient Pharmacy displaying the status of the claim. For an example, see "Finishing an ePharmacy Order" in this section.

Example: Finishing an Order from OERR

```
Select Outpatient Pharmacy Manager Option: RX (Prescriptions)
          Orders to be completed for all divisions: 16
Do you want an Order Summary? No//
                                    <Enter> NO
          Patient Prescription Processing
          Barcode Rx Menu ...
          Complete Orders from OERR
          Discontinue Prescription(s)
          Edit Prescriptions
          ePharmacy Menu...
         List One Patient's Archived Rx's
         Manual Print of Multi-Rx Forms
          Reprint an Outpatient Rx Label
         Signature Log Reprint
         View Prescriptions
Select Rx (Prescriptions) Option: COMPlete Orders from OERR
There are multiple Institutions associated with this Outpatient Site for
finishing orders entered through CPRS. Select the Institution for which to
finish orders from. Enter '?' to see all choices.
Select CPRS ORDERING INSTITUTION: ALBANY// <Enter> NY VAMC 500
You have selected ALBANY.
After completing these orders, you may re-enter this option and select again.
      <There are 3 flagged orders for ALBANY>
Select By: (PA/RT/PR/CL/FL/E): PATIENT// <Enter>
All Patients or Single Patient: (A/S/E): SINGLE// <Enter>
Select Patient: OPPATIENT16, ONE OPPATIENT16, ONE
                                                   4-3-41
                                                                000246802
         SC VETERAN
WARNING: ** This patient has been flagged with a Bad Address Indicator.
Do you want to see Medication Profile? Yes// <Enter>
```



The user may enter a question mark at the "Select Patient" prompt to get a list of patients with pending orders. A single patient may be selected for processing, or pending orders for all patients may be processed in sequence by the time of each order's entry into the system.



Flagged orders will not be processed. They are not a part of any pending orders. To process flagged orders, you should enter **FL** at the "Select By" prompt. This ensures you will view all patients with flagged pending orders, allowing you to address their flagged orders; however, if you know which patients have flagged orders, you can access the flagged orders through the Medication Profile.



If the user answers **YES** to "Do you want to see Medication Profile?" and the patient has remote prescription(s), the following prompt appears.

```
REMOTE PRESCRIPTIONS AVAILABLE!
Display Remote Data? N//
```

If the user answers **YES** to "Display Remote Data?" then the "Remote Facilities Visited" screen appears, allowing the user to see what facilities the patient has prescriptions at and what those prescriptions are.

After the user answers the medication profile prompt, a warning displays if no allergy assessment has been made. The patient's eligibility and RX patient status also displays.

```
OPPATIENT16, ONE
                        4-3-41 000-24-6802
  YES SC VETERAN
    No Allergy Assessment!
Press Return to continue: <Enter>
Eligibility: SC
RX PATIENT STATUS: SERVICE CONNECTED// <Enter>
```

(The Patient Information and Medication Profile screens display next, but are not shown in this example.)

```
Pending OP Orders (ROUTINE) March 13, 2008 16:31:33
                                                            Page:
                                                                    1 of 2
OPPATIENT16, ONE
                                               <NO ALLERGY ASSESSMENT>
 PID: 000-24-6802
                                                Ht (cm): 177.80 (02/08/2008)
  DOB: APR 3,1941 (66)
                                                Wt(kq): 90.45 (02/08/2008)
                                               * Editing starred fields will
*(1) Orderable Item: ACETAMINOPHEN TAB
                                                create a new order
        CMOP Drug: ACETAMINOPHEN 500MG TAB
 (2)
      Drug Message: NATL FORM
 (3)
           *Dosage: 500 (MG)
             Verb: TAKE
    Dispense Units: 1
            *Route: ORAL
         *Schedule: BID
 (4) Pat Instruct:
 Provider Comments: ProvComments
              SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
 (5) Patient Status: SERVICE CONNECTED
 (6) Issue Date: MAR 13,2008 (7) Fill Date: MAR 13,2008
 (8) Days Supply: 30
                                 (9) QTY (TAB): 60
     Enter ?? for more actions
BY Bypass DC Discontinue
                                                FL Flag/Unflag
ED Edit
                        FN Finish
Select Item(s): Next Screen/// FN Finish
```

After "Finish" is selected, the user is prompted to fill in any information missing from fields needed to complete the order.



If you attempt to process a flagged order, you are prompted "Unflag Order? NO//". If you respond YES, enter comments to unflag the order and continue with processing. If you respond **NO**, you cannot process the order because it is still flagged.



If an order is sent from OERR without a Dispense Drug selected, and there is only one Dispense Drug tied to the Orderable Item, that drug will be inserted in the DRUG field (#2 on the screen). If there is more than one Dispense Drug tied to the Orderable Item, a "No Dispense Drug Selected" message will display in the DRUG field (#2 on the screen) and a Dispense Drug must be selected to complete/finish the order.

```
The following Drug are available for selection:
1. ACETAMINOPHEN 325MG
2. ACETAMINOPHEN EXTRA STR 500MG
```



If the drug list is empty, the user should select a new orderable item or the order can be discontinued.

```
Select Drug by number: (1-2): 1
-----example continues-----
```

Drug interaction and allergy checks are now performed. If the patient does not have an allergy assessment, a warning is displayed. If the user continues with the order, the user will have to create an intervention.

```
Now doing drug interaction and allergy checks. Please wait...

There is no allergy assessment on file for this patient.

You will be prompted to intervene if you continue with this prescription
Do you want to Continue?: N// YES
```

To continue with the order, respond **YES**. To cancel the order, respond **NO**.

If the user continues with the order, and the patient does not have an allergy assessment, and does not already have a prescription for which an Intervention was created, the user will have to create an intervention.

To create a new intervention, respond to the prompts as they are presented..

```
Now creating Pharmacy Intervention
for ACETAMINOPHEN 325MG
PROVIDER: OPPROVIDER4, TWO
RECOMMENDATION: ?
   Answer with APSP INTERVENTION RECOMMENDATION, or NUMBER
   Choose from:
               CHANGE DRUG
               CHANGE FORM OR ROUTE OF ADMINISTRATION
  3
               ORDER LAB TEST
   4
               ORDER SERUM DRUG LEVEL
   5
               CHANGE DOSE
   6
               START OR DISCONTINUE A DRUG
   7
               CHANGE DOSING INTERVAL
               NO CHANGE
                OTHER
RECOMMENDATION: 2 CHANGE FORM OR ROUTE OF ADMINISTRATION
See 'Pharmacy Intervention Menu' if you want to delete this
intervention or for more options.
Would you like to edit this intervention ? N//
```

If the patient does not have an allergy assessment, but already has a prescription for which an Intervention was created, the user will have the option to copy the existing Intervention.

```
Now doing drug interaction and allergy checks. Please wait...

No Allergy Assessment - Do you want to duplicate Intervention?: Yes//
```

To duplicate the intervention, respond **YES**. The Intervention is displayed and the user is prompted to edit the Intervention.

```
No Allergy Assessment - Do you want to duplicate Intervention?: Yes// YES

INTERVENTION DATE: JUL 20, 2009 PATIENT: OPPATIENT16, ONE
PROVIDER: OPPROVIDER4,TWO PHARMACIST: OPPHARMACIST4, THREE
DRUG: ACETAMINPHEN 325MG INSTITUTED BY: PHARMACY
INTERVENTION: ALLERGY RECOMMENDATION: NO CHANGE
ORIGINATING PACKAGE: OUTPATIENT DIVISION: ALBANY

Would you like to edit this intervention ? N//
```

To accept the existing intervention as is, respond **NO**. The edit the intervention, respond **YES**. Edit as any other intervention.

To create a new intervention, respond **NO**.

```
No Allergy Assessment - Do you want to duplicate Intervention?: Yes// n NO
Now creating Pharmacy Intervention
for ACETAMINPHEN 325MG
```

If the user chooses to copy Provider Comments into the Patient Instructions, they will display on the end of both the Patient Instructions and the Sig.



If the patient has been identified as having another language preference, the Provider Comments will not be appended to the other language Sig.

Example: Finishing an Order from OERR (continued)

After an order is accepted, the user will be prompted to enter the missing information.

```
METHOD OF PICK-UP:
WAS THE PATIENT COUNSELED: NO// Y YES
WAS COUNSELING UNDERSTOOD: NO// Y YES
Do you want to enter a Progress Note? No// <Enter> NO
       SC Percent: 20%
     Disabilities:
KNEE CONDITION
                                                 10% - SERVICE CONNECTED
TRAUMATIC ARTHRITIS
                                                 10% - SERVICE CONNECTED
SEPTUM, NASAL, DEVIATION OF
                                                  0% - SERVICE CONNECTED
                                                  0% - SERVICE CONNECTED
RESIDUALS OF FOOT INJURY
This Rx has been flagged as: SC
Was treatment for Service Connected condition? YES// <Enter>
Press Return to Continue:
```

Flagging and Unflagging a New Pending Order

Flagging a pending order allows you to prevent an order from being processed and attach a note known as a flag to the pending order. After the flag has been addressed, you can unflag the order, allowing it to then be processed. Note that only new pending orders can be flagged.

Flagged orders will not be processed. When you have flagged orders to process from the *Complete Orders from OERR* option, you should enter **FL** at the "Select By" prompt (shown in the following example). This ensures you will view all patients with flagged pending orders, allowing you to address their flagged orders; however, if you know which patients have flagged orders, you can access the flagged orders through the Medication Profile.

The following provides examples of how to flag and unflag pending orders from a medication profile within the *Complete Orders from OERR* option.

Example: Finishing an Order from OERR

```
Select Outpatient Pharmacy Manager Option: RX (Prescriptions)
          Orders to be completed for all divisions: 16
Do you want an Order Summary? No// <Enter> NO
          Patient Prescription Processing
          Barcode Rx Menu ...
          Complete Orders from OERR
          Discontinue Prescription(s)
         Edit Prescriptions
         ePharmacy Menu...
         List One Patient's Archived Rx's
         Manual Print of Multi-Rx Forms
         Reprint an Outpatient Rx Label
         Signature Log Reprint
         View Prescriptions
Select Rx (Prescriptions) Option: COMPlete Orders from OERR
There are multiple Institutions associated with this Outpatient Site for
finishing orders entered through CPRS. Select the Institution for which to
finish orders from. Enter '?' to see all choices.
Select CPRS ORDERING INSTITUTION: ALBANY// <Enter> NY VAMC 500
You have selected ALBANY.
After completing these orders, you may re-enter this option and select again.
      <There are 3 flagged orders for ALBANY>
Select By: (PA/RT/PR/CL/FL/E): PATIENT// FL <Enter>
Do you want to see Medication Profile? Yes// <Enter>
```

After answering the "Medication Profile" prompt, a warning displays if no allergy assessment has been made. The patient's eligibility and RX patient status also displays.

```
OPPATIENT16,ONE 4-3-41 000246802
YES SC VETERAN
No Allergy Assessment!

Press Return to continue: <Enter>
Eligibility: SC
RX PATIENT STATUS: SERVICE CONNECTED// <Enter>
```

If a pending order is flagged, the row number is highlighted on the Medication Profile screen (shown in the following example). Select the order to view the flag or to flag the new pending order.

Example: A Flagged Pending Order

```
Medication Profile Mar 13, 2008@16:31:24
                                              Page:
                                                    1 of
                                     <NO ALLERGY ASSESSMENT>
OPPATIENT16, ONE
 PID: 000-24-6802
                                      Ht(cm): 177.80 (02/08/2007)
 DOB: APR 3,1941 (66)
                                      Wt(kg): 90.45 (02/08/2007)
 SEX: MALE
                                             ISSUE LAST REF DAY
# RX # DRUG
                                        QTY ST DATE FILL REM SUP
-----ACTIVE-----
1 100002518 PENICILLAMINE 250MG TAB
                                   31 A 02-29 02-29 5 31
-----PENDING------
2 ACETAMINOPHEN 500MG TAB QTY: 60 ISDT: 03-13 REF: 3
       Enter ?? for more actions
PU Patient Record Update NO New Order PI Patient Information SO Select Order
Select Action: Quit// SO Select Order
Select Orders by number: (1-2): 2
```

From the Pending OP Orders screen, you can flag and unflag an order, as well as view the flagged reason. To flag the order, enter **FL** and then enter a "REASON FOR FLAG", alert the proper individual that the flag has been added, and the flagging process is complete.

Example: Flagging an Order

188

```
REASON FOR FLAG: DOUBLE CHECK WITH PATIENT FOR HEART CONDITION BEFORE DISPENSING.

Send alert to: PSOUSER, ONE// BIRMINGHAM ALABAMA OP PHARMACIST
... order flagged.
```

When an order is flagged, "FL-" is placed in front of "Pending OP Orders" in the upper left corner, and the flagged reason is listed below the patient identifying information.

Example: A Flagged Order

```
FL-Pending OP Orders (ROUTINE) March 13, 2008 16:31:33
                                                            Page:
OPPATIENT16, ONE
                                                <NO ALLERGY ASSESSMENT>
  PID: 000-24-6802
                                                 Ht(cm): 177.80 (02/08/2007)
  DOB: APR 3,1941 (66)
                                                 Wt(kg): 90.45 (02/08/2007)
Flagged by OPPHARM, TWO on 03/13/08@23:14: DOUBLE CHECK WITH PATIENT FOR HEART
CONDITION BEFORE DISPENSING.
*(1) Orderable Item: ACETAMINOPHEN TAB
                                               * Editing starred fields will
 (2)
       CMOP Drug: ACETAMINOPHEN 500MG TAB
                                                 create a new order
      Drug Message: NATL FORM
           *Dosage: 500 (MG)
 (3)
              Verb: TAKE
    Dispense Units: 1
            *Route: ORAL
         *Schedule: BID
 (4) Pat Instruct:
 Provider Comments: ProvComments
              SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
 (5) Patient Status: SERVICE CONNECTED
       Issue Date: MAR 13,2008 (7) Fill Date: MAR 13,2008
                                   (9) QTY (TAB): 60
 (8)
      Days Supply: 30
        Enter ?? for more actions
BY Bypass
                      DC Discontinue
                                                FL Flag/Unflag
ED Edit
                        FN Finish
Select Item(s): Next Screen// FL Flag/Unflag
```

To unflag an order, enter **FL** at the "Select Item(s)" prompt, and then enter your "COMMENTS". When you press **<Enter>**, the order is no longer flagged.

Example: Unflagging an Order

```
FLAGGED: 03/13 23:14 by OPPHARM, TWO

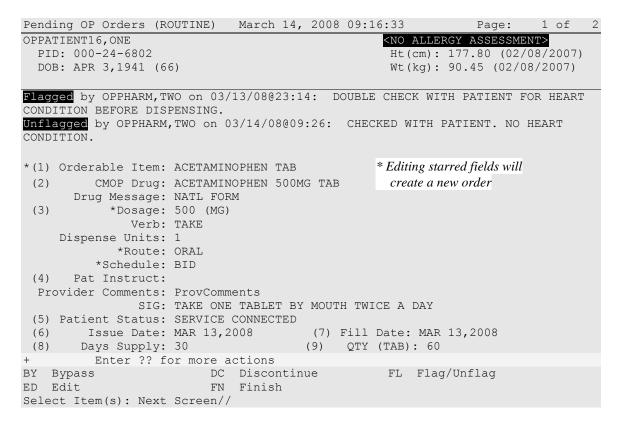
DOUBLE CHECK WITH PATIENT FOR HEART CONDITION BEFORE DISPENSING.

COMMENTS: CHECKED WITH PATIENT. NO HEART CONDITION.

... order unflagged.
```

At that point, the flag from the Medication Profile is removed, but the flagged/unflagged reason remains on the Pending OP Orders screen unless you reflag the order.

Example: An Unflagged Order



After pending orders have been unflagged, they can be processed.



If you attempt to process a flagged order, you are prompted "Unflag Order? NO//". If you respond **YES**, enter comments to unflag the order and continue with processing. If you respond **NO**, you cannot process the order because it is still flagged.

Changes to Finishing Pending Orders Process - Digitally Signed Orders Only

Digitally signed orders will be identifiable by the "Digitally Signed Order' message in reverse video on the message bar.



If the terminal in use is set up as a VT-100, there may be problems with this message display and the "Processing Digitally Signed Order" message. Updating the VistA terminal session to use VT-320 will avoid this problem.

The provider's PKI certificate is re-validated when accessing a digitally signed order. If the validation check is unsuccessful, an error code is sent to the pharmacist and an entry is made in the Rx Activity Log. The error code type results in either the order being automatically rejected/discontinued or the pharmacist being given the choice to finish, bypass, or discontinue the order. Digitally signed prescriptions that have been discontinued cannot be reinstated. The Speed Discontinuation functionality no longer deletes unverified prescriptions.

Finishing an Order from OERR with Multiple Institutions

Multiple Institution entries can be added using the *Site Parameter Enter/Edit* option. If a site has multiple entries in the CPRS ORDERING INSTITUTION field, the user is prompted for an Institution when entering the *Complete Orders from OERR* option. After an Institution is selected, the Pending Orders shown for completion will be those Pending Orders from clinics that are associated with the Institution selected.

Example: Finishing an Order from OERR with Multiple Institutions

```
Select Outpatient Pharmacy Manager Option: RX (Prescriptions)

Orders to be completed for all divisions: 21

Do you want an Order Summary:? No// <Enter> NO

Select Rx (Prescriptions) Option: COmplete Orders from OERR

There are multiple Institutions associated with this Outpatient Site for finishing orders entered through CPRS. Select the Institution from which to finish orders. Enter '?' to see all choices.
```

```
Select CPRS ORDERING INSTITUTION: BIRMINGHAM, AL.// <Enter> BIRMINGHAM, AL.521

You have selected BIRMINGHAM, AL..

After completing these orders, you may re-enter this option and select again.

Select By: (PA/RT/PR/CL/FL/E): PATIENT// PA
```

[See the previous example for completion of this option.]

Finishing an ePharmacy Order

After the user reviews the ePharmacy order and chooses to accept the order, the billing data is sent to ECME, which sends a message back to Outpatient Pharmacy displaying the status of the claim. The ECME section of the Activity Log is also updated.

```
Prescription 100003840 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Gathering claim info
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE

Another New Order for OPPATIENT, FOUR? YES//
```

Activity Log

Multiple Activity Logs exist for a completed or finished order. Any single activity log or all activity logs can be viewed.

Use the hidden action (AL) to view the activity log once a completed or finished order is selected.

Example: Activity Log

```
OP Medications (ACTIVE) Jun 08, 2006 11:01:29
                                                         Page:
                                                                 1 of
                                                                 <A>
OPPATIENT29, ONE
                                                Ht (cm): 175.26 (06/07/2000)
  PID: 000-87-6543
  DOB: SEP 12,1919 (81)
                                                Wt(kg): 79.09 (06/07/2000)
               Rx #: 503915
 (1) *Orderable Item: AMPICILLIN CAP, ORAL *** (N/F) ***
              Drug: AMPICILLIN 250MG CAP *** (N/F) ***
 (2)
            *Dosage: 750 (MG)
 (3)
              Verb: TAKE
     Dispense Units: 3
              Noun: CAPSULE(S)
             *Route: ORAL
          *Schedule: QID
          *Duration: 10D (DAYS)
 (4) Pat Instructions: WITH FOOD AVOIDING DAIRY FOODS
             SIG: TAKE THREE CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
                    WITH FOOD AVOIDING DAIRY FOODS
 (5) Patient Status: SERVICE CONNECTED
         Enter ?? for more actions
DC Discontinue PR Partial RL ED Edit RF (Refill) RN
                                                     Release
Select Action: Next Screen// AL
Select Activity Log by number
1. Refill 2. Partial 3. Activity 4. Labels
5. Copay 6. ECME 7. All Logs: (1-7): 7// Enter>
```

-----example continues-----

The prompt for the selection of the Activity Log depends on what type of prescription is selected. For example, if the prescription is an ePharmacy prescription, ECME displays as item #6. If the prescription is a CMOP prescription, CMOP displays as item #6.

Example: Activity Log (continued)

```
Rx Activity Log Jun 08, 2006 11:02:51 Page: 1 of 2
OPPATIENT29, ONE
 PID: 000-87-6543
                                      Ht(cm): 175.26 (06/07/2000)
 DOB: SEP 12,1919 (81)
                                      Wt(kg): 79.09 (06/07/2000)
Rx #: 503904 Original Fill Released: 5/25/01
Routing: Window Finished by: OPPROVIDER, ONE
Refill Log:
# Log Date Refill Date Qty Routing Lot # Pharmacist
______
There are NO Refills For this Prescription
Partial Fills:
# Log Date Date Qty Routing Lot # Pharmacist
______
There are NO Partials for this Prescription
Activity Log:
# Date Reason Rx Ref Initiator Of Activity
______
  05/25/01
                      ORIGINAL
Comments: Patient Instructions Not Sent By Provider.
2 05/25/01 PROCESSED ORIGINAL OPPROVIDER, ONE
Comments: Label never queued to print by User
Label Log:
          Rx Ref
# Date
                              Printed By
_____
1 09/25/06 ORIGINAL
                               OPPROVIDER, ONE
Comments: ScripTalk label printed
2 09/25/06 ORIGINAL
                               OPPROVIDER, ONE
Comments: ROUTING=WINDOW (BAD ADDRESS)
Copay Activity Log:
# Date Reason Rx Ref Initiator Of Activity
There's NO Copay activity to report
ECME Log:
# Date/Time Rx Ref Initiator Of Activity
1 11/30/05@18:38:29 ORIGINAL OPPHARMACIST, ONE
Comments: No claim submission made. Billing Determination was: DRUG NOT
BILLABLE.
              [This shows an extended view of what is seen on the screen.]
       Enter ?? for more actions
Select Action:Quit// <Enter>
```

-----example continues-----

The Activity Logs will appear the same as the OP logs with the exception of the addition of a CMOP Event Log. Here is an example of a sample CMOP Event Log:

Example: Activity Log (continued)

```
Rx Activity Log Jul 06, 1996 09:54:24 Page: 2 of 2
OPPATIENT2, ONE
 PID: 000-23-4567
                               Ht (cm): 188.40 (12/02/00)
 DOB: DEC 14,1960 (34)
                               Wt(kg): 109.10 (12/02/00)
CMOP Event Log:
Date/Time Rx Ref TRN-Order Stat Comments
______
09/17/00@1526 Ref 1
                   267-4
                             DISP NDC: 1234TEST5678
CMOP Lot#/Expiration Date Log:
Rx Ref Lot #
                        Expiration Date
______
Ref 1
            1234TST
                         07/07/00
      Enter ?? for more actions
Select Action:Quit// <Enter>
```

If this were an ePharmacy prescription, the prompt will display as follows:

```
Select Activity Log by number

1. Refill 2. Partial 3. Activity 4. Labels

5. Copay 6. ECME 7. All Logs: (1-7): 7/// 6
```

For an ePharmacy prescription, the ECME Event Log displays before the CMOP Event Log.

Example: ECME Event Log of an ePharmacy prescription

```
Rx Activity Log Nov 07, 2005@12:23:37 Page: 1 of 1
OPPATIENT, FOUR
                                       Ht (cm): _____
 PID: 000-01-1322P
 DOB: NOV 12,1975 (29)
                                       Wt(kg): (
Rx #: 100003861 Original Fill Released:
Routing: Window Finished by: OPPHARMACIST4, THREE
ECME Log:
# Date Rx Ref Initiator Of Activity
_____
1 11/07/05 ORIGINAL OPPHARMACIST4, THREE
Comments: ECME:REJECT WORKLIST-DUR OVERRIDE CODES(DD/M0/1B)-E
PAYABLE-pOPP INSURANCE
ECME REJECT Log:
# Date/Time Rcvd Rx Ref Reject Type STATUS Date/Time Resolved
______
       Enter ?? for more actions
Select Action:Quit// <Enter>
```

Discontinue Prescription(s)

[PSO C]

The *Discontinue Prescription(s)* option is used to either discontinue a prescription without deleting its record from the files, or reinstate a prescription discontinued by pharmacy.

Example: Discontinuing a prescription

```
Select Rx (Prescriptions) Option: DISCONTINUE Prescription(s)
Discontinue/Reinstate by Rx# or patient name: (R/P): PATIENT NAME
Are you entering the patient name or barcode: (P/B): Patient Name
Select PATIENT NAME: OPPATIENT16,ONE OPPATIENT16,ONE 9-7-52 000246802
    YES SC VETERAN
                                                         ISSUE LAST REF DAY
                                           ISSUE LAST KEF DAY
QTY ST DATE FILL REM SUP
   RX # DRUG
______
-----ACTIVE------
1 100003218 AMPICILLIN 500MG CAP 10 A 05-11 05-11 5 30 2 100003238 PREDNISONE 5MG TAB 30 A 05-30 05-30 3 10 3 100003205$ TRIPROLIDINE & PSEUDOEPHEDRINE 10 A 05-01 05-01 5 31
4 100003216$ AMPICILLIN 10GM INJ. M.D.V. 30 DC 05-07 05-07 5 30 5 100003214 PREDNISONE 1MG TAB 30 DE 05-07 05-07 3 10
Press RETURN to continue: <Enter>
Discontinue all or specific Rx#'s?: (A/S): SPECIFIC Rx's
ENTER THE LINE \#: (1-5): 2
Comments: RESTRICTED/NF MED
Nature of Order: SERVICE CORRECTION// ??
                            Require Print Print on
 Nature of Order Activity E.Signature Chart Copy Summary
 WRITTEN
                              X
X
 VERBAL
 TELEPHONED
                                           X
 SERVICE CORRECTION
                                                X
 POLICY
                                           X
 DUPLICATE
 SERVICE REJECT
Nature of Order: SERVICE CORRECTION// SERVICE REJECT R
Requesting PROVIDER: OPPROVIDER30, TWO // <Enter>
                                                  TO
100003238 PREDNISONE 5MG TAB
                                                 OPPATIENT16, ONE
                       Rx to be Discontinued
Press Return to Continue: <Enter>
OK to Discontinue? N// YES
```

When a prescription is discontinued, the software checks for any unresolved ECME rejections for that prescription. If a DUR REJECT or REFILL TOO SOON REJECT is found, it will be marked resolved with the reason PRESCRIPTION DISCONTINUED.

When an ePharmacy prescription is discontinued, the software checks for any unreleased fills with a PAYABLE claim. If found, a reversal request is sent to ECME, which forwards it on to the third party payer.

When a pending renewal order is discontinued, Outpatient Pharmacy verifies if there is an active prescription for the same drug. If an active prescription is found, you are prompted with "There is an active Rx for this pending order, Discontinue both (Y/N)?" If you respond **YES**, both the pending order and the active order are discontinued. If you respond **NO**, only the pending order is discontinued and the active order is not discontinued.

Edit Prescriptions[PSO RXEDIT]

This option allows changes to be made to entered orders. Newly entered orders can be edited before release by typing in the corresponding field number. Previously entered orders can be edited by entering the prescription number, then specifying the field to be edited. An asterisk or star (*) is shown in front of each field that will create a new order if it is changed. See the section "Editing an Order" for an example.

When editing fields preceded by an asterisk (*) in an ePharmacy order (or electronically third party billable prescription), upon acceptance of the edited order the original prescription will be discontinued and a new order created. If the latest fill of the original order has not been released and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription. See "Editing an ePharmacy Order" for an example of editing ePharmacy orders.

ePharmacy Menu

[PSO EPHARMACY MENU]

The following menu items are locked with the PSORPH key: ePharmacy Medication Profile Division Preferences, ePharmacy Site Parameters, Third Party Payer Rejects – View/Process and Third Party Payer Rejects – Worklist. The following menu item is locked with the PSO TRICARE MGR key: TRICARE Bypass/Override Report.

These menu items allow the user to perform ePharmacy specific functions including rejections by third party payers including DUR/RTS and has the following options:

- Ignored Rejects Report
- *ePharmacy Medication Profile (View Only)*
- NDC Validation
- ePharmacy Medication Profile Division Preferences
- ePharmacy SiteParameters
- Third Party Payer Rejects View/Process
- Third Party Payer Rejects Worklist
- TRICARE Bypass/Override Report

DURs can occur when a third party determines there are safety issues involved with an Rx claim submission, and they can be due to high dose, drug interaction, and excessive utilization. The third party payer returns an NCPDP rejection code of 88 to indicate a DUR.

Refill Too Soon rejections happen when a third party payer determines that a prescription is being processed too early compared to the last time the prescription was filled. This can occur for several reasons, including third party payer's policy differs from VA policy, patient receiving medication at another pharmacy, or the provider may have increased the dosage or frequency of the medication. The third party payer returns an NCPDP rejection code of 79 to indicate a Refill Too Soon.

Prescriptions rejected as DUR and Refill Too Soon are moved to the REFILL TOO SOON/DUR REJECTS (Third Party) section of the Medication Profile. The user must resolve a rejected prescription before other actions such as release, label print, renew, and refill, among others, can be performed on it. Actions may still be taken on these prescriptions through CPRS.

Ignored Rejects Report [PSO IGNORED REJECTS REPORT]

This option gives the user the ability to run a report for third-party rejects that have been ignored and consequently closed by the pharmacy users.

The user can select one of the following parameters to filter the data in the report:

- **DIVISION**: Allows the user to select one, some or all divisions.
- **DATE RANGE**: Allows the user to select a date range.

- **SORT BY**: Allows the user to choose different fields to sort the report by. Any combination can be selected:
 - o **PATIENT**: Allows the user to select a single, multiple or all patients
 - o **DRUG:** Allows the user to select a single, multiple or all drugs.
 - USER: Allows the user to select a single, multiple or all users that have ignored third party rejects.

Example: Ignored Rejects Report

```
Select ePharmacy Menu Option: IR Ignored Rejects Report
You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.
DIVISION: ^ALL
BEGIN REJECT DATE: 030606 (MAR 06, 2006)
 END REJECT DATE: 061407 (JUN 14, 2007)
    Enter the SORT field(s) for this Report:
       1 - PATIENT
       2 - DRUG
       3 - USER
    Or any combination of the above, separated by comma,
    as in these examples:
       2,1 - BY PATIENT, THEN DRUG
      3,1,2 - BY USER, THEN BY PATIENT, THEN BY DRUG
SORT BY: PATIENT// 1,2
     SORT BY PATIENT
         THEN BY DRUG
You may select a single or multiple PATIENTS,
or enter ^ALL to select all PATIENTS.
PATIENT: ^ALL
You may select a single or multiple DRUGS,
or enter ^ALL to select all DRUGS.
DRUG: ^ALL
DEVICE: HOME// [Select Printer Device]
```

```
Ignored Rejects Report

Sorted by PATIENT, DRUG

Division: ALBANY
Run Date: Jun 15, 2007@15:26:35

Rx#

DRUG

PATIENT

IGNORE DT IGNORED BY

192029A

Comments: PATIENT WAS RUNNING OUT OF DRUG.

Payer Message: NEXT RFL 041907, DAYS TO RFL 1, LAST FILL 112706 VIA MAIL, REFILL TOO SOON.

2990211

ALENDRONATE 70MG/75M OPPATIENT, TWO (0000) 05/20/07 OPUSER, ONE Comments: NEXT POSSIBLE FILL WAS TOO FAR OUT.

Payer Message: PLAN LIMIT EXCEEDED. NEXT POSSIBLE FILL: 05/29/2007
```

ePharmacy Medication Profile (View Only) [PSO PMP]

Although the name indicates "ePharmacy Medication Profile", this option can be used to list the medication profile for any patient on file. It will be used mostly by ePharmacy users for claims research purposes. This functionality is also available from the Reject Worklist through the Medication Profile (MP) action.

Example 1: Medication Profile with default view

```
Patient Medication Profile Jun 04, 2007@19:22:16 Page: 1 of 1
OPPATIENT, ONE
                                                                                                                                                                  <A>
    PID: 000-12-5678
DOB: NOV 28,1946 (60)
                                                                                                                 HEIGHT (cm): 175.26 (11/21/2006)
                                                                                                                WEIGHT(kg): 108.18 (08/09/2007)
EXP/CANCEL CUTOFF: 120 DAY

# Rx# DRUG [^] QTY ST DATE FILL REM SUP

1 100004112e ALBUTEROL INHALER 1 A 04-21-07 04-21-07 11 7

2 300483e ALPRAZOLAM 0.25MG TABS 30 DC 06-14-07 06-14-07 11 30

3 100004113e AMITRIPTYLINE 10MG TAB 60 A 04-21-07 04-21-07 11 30

4 100004075e CABERGOLINE 0.5MG TAB 7 E 05-18-05 05-18-05 6 7

5 100004155 DESIPRAMINE 25MG 90 S 02-23-07 02-11-07 11 90

6 100004022$e DIGOXIN 0.05MG/ML ELIX (60CC) 30 A 02-01-07 02-20-07 10 90

7 100004081 METAPROTERENOL 5% SOLUTION 10ML 15 DC 06-02-07 06-03-07 11 15

8 100004082 METAPROTERENOL 5% SOLUTION 10ML 10 DC 06-02-07 06-03-07 11 10

9 100004083e METAPROTERENOL 5% SOLUTION 10ML 15 A> 06-02-07 06-23-07 11 15

10 100004079e NICOTINE 10MG/ML SOLN NASAL SPRAY 1 A> 06-02-07 06-23-07 11 15

11 100003298 SIMVASTATIN 20MG TAB 5 DC 05-28-05 04-27-07 3 30

12 100003298A SODIUM CHLORIDE 0.9% NASAL SOLN(0 1 A 05-10-07 05-10-07 11 30

PENDING (2 order)
    SEX: MALE
                                                                                            EXP/CANCEL CUTOFF: 120 DAY
  14 ALBUTEROL INHALER
                                                                                                                                  RF 06-03-07
                                                                                                                                                                                                    30
                                                                                                                                  RN 06-02-07 3
  15 AMITRIPTYLINE 10MG TAB
                                                                                                                                                                                                       10
  16 TAMOXIFEN CITRATE 10MG TABS
                                                                                                                        Date Documented: 06/04/07
                      Enter ?? for more actions
CV Change View PI Patient Information SIG Show/Hide SIG GS Group by Status PU Patient Record Update
Select: Ouit//
```

The following options are available as Hidden Menu actions on this screen.

```
DR
       - Sort by Drug
                                   LF
                                          - Sort by Last Fill
       - Sort by Prescription
                                   ID
                                           - Sort by Issue Date
RX
       - Switch between LAST FILL and LAST RELD (release date)
RDD
```

After selecting a prescription on this screen, the *REJ* option is available on the "RX View" screen's hidden menu. This action displays third party reject information for the prescriptions with third party rejects.

The CV (Change View) option allows the user to change some characteristics of the screen above. The user can also save and/or delete preferences, which will be used every time the user runs the Medication Profile option or invokes it from the Reject Worklist. The users can have one set of preferences for each Division defined.

Example 2: Change View action

Enter CV at the "Select:" prompt to change the view preferences.

```
OPPROVIDER, ONE's current default view (ALBANY):
        _____
    EXP/CANCEL CUTOFF : 120 DAYS
    SORT BY : DRUG NAME
                    : ASCENDING
    SORT ORDER
    DISPLAY SIG
                    : NO
    GROUP BY STATUS : YES
    DISPLAY ORDER COUNT: YES
    Delete this default view? NO// <Enter>
EXP/CANCEL CUTOFF: 120// 120 DAYS
SORT BY: DR// DRUG NAME
SORT ORDER: ASCENDING// ASCENDING
DISPLAY SIG: OFF// OFF
GROUP BY STATUS: OFF// ON
DISPLAY ORDER COUNT: ON// OFF
Save as your default View? NO// YES
Saving...OK!
```

Example 3: Display SIG action

Enter SIG at the "Select:" prompt to toggle the Sig display on or off.

```
Patient Medication Profile Jun 04, 2007@19:22:16
                                                           Page:
  PID: 000-12-5678
                                             HEIGHT (cm): 175.26 (11/21/2006)
  DOB: NOV 28,1946 (60)
                                             WEIGHT(kg): 108.18 (08/09/2007)
                                      EXP/CANCEL CUTOFF: 120 DAY
  SEX: MALE
                                                       ISSUE LAST
                                                                         DAY
               DRUG [^]
  # Rx#
                                                QTY ST DATE
                                                               FILL
                                                                         SUP
  1 100004112e ALBUTEROL INHALER
                                                  1 A 04-21-07 04-21-07
   SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
  2 300483e ALPRAZOLAM 0.25MG TABS
                                                 30 DC 06-14-07 06-14-07 30
   SIG: TAKE 2 CAPSULES BY MOUTH TAKE
                                                  60 A 04-21-07 04-21-07
  3 100004113e AMITRIPTYLINE 10MG TAB
   SIG: TAKE TWO BY MOUTH EVERY DAY
                                                  7 E 05-18-05 05-18-05
                                                                           7
  4 100004075e CEFOPERAZONE
   SIG: TAKE 1 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED
               DESIPRAMINE 25MG
  5 100004155
                                                 90 S 02-23-07 02-11-07
                                                                          90
   SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
  6 100004022$e DIGOXIN 0.05MG/ML ELIX (60CC) 30 A 02-01-07 02-20-07
                                                                          90
   SIG: 300 LB BY MOUTH EVERY FOUR HOURS
  7 100004081 METAPROTERENOL 5% SOLUTION 10ML 15 DC 06-02-07 06-03-07 15
   SIG: TAKE 1 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED
  8 100004082 METAPROTERENOL 5% SOLUTION 10ML 10 DC 06-02-07 06-03-07 10
   SIG: TAKE 2 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED
  9 100004083e METAPROTERENOL 5% SOLUTION 10ML 15 A 06-02-07 06-23-07 15
   SIG: TAKE 3 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED
         Enter ?? for more actions
CV Change View PI Patient Information SIG Show/Hide SIG GS Group by Status PU Patient Record Update
Select: Quit//
```

NDC Validation

The initial validation of the NDC can be performed by a pharmacy technician. This functionality only applies to local fills that are not sent to OPAI. This function provides a pharmacy technician the ability to manually enter the prescription number or scan the bar code of the existing prescription label. Then the user may manually enter or scan the NDC of the stock bottle used to fill the prescription. When the system matches the NDC, confirmation is provided to the pharmacy tech and allows the technician to continue processing. However, if the system detects a mismatch and the NDC of the stock bottle has an associated entry in the synonym file, the NDC will be updated in Prescription file (#52) for the fill. The system will then prompt the technician to press enter to continue, a new label will be printed, the original electronic claim reversed, and a new claim submission will be transmitted with the new NDC. In the event that the revised NDC prompts a RTS/DUR rejection, the system will immediately send the item to the Reject Worklist.

In a case where the NDC entered is not defined for the drug in the Drug File, the system prompts the technician that a mismatch has occurred and the prescription needs to be validated by a pharmacist. The system notes that the NDC had not been validated and allows the pharmacy tech to move to the next prescription. In the event of a change of NDC prompted a rejection, the system immediately sends the item to the Reject Worklist.

The releasing pharmacist will receive a notation that NDC has been validated by technician when processing. If the NDC change has prompted a claim reversal and produced a RTS/DUR rejection, the pharmacist will be presented with a Reject Processing screen at release.

```
Example: Matched NDC:
```

```
Select ePharmacy Menu Option: NV NDC Validation
Prescription: 101310 DIPYRIDAMOLE 25MG TAB
Rx: 101310 Fill: 0 Patient: OPPATIENT, ONE Drug: DIPYRIDAMOLE 25MG TAB NDC: 00597-0017-10
                                       NDC: 00597-0017-10
Prescription label NDC: 00597-0017-10
Stock NDC: 00597001710
NDC match confirmed
Prescription:
Example: Non-matched NDC:
Prescription: 101341
                           BIPERIDEN 2MG TAB
                 Fill: 0 Patient: OPPATIENT, ONE
Rx: 101341
Drug: BIPERIDEN 2MG TAB
                                       NDC: 00044-0120-05
Prescription label NDC: 00044-0120-05
Stock NDC: 00044012006
Due to a change in NDC, a claims reversal and resubmission will be performed.
Prescription 101341 successfully submitted to ECME for claim generation.
Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
E PAYABLE
Prescription:
```

ePharmacy Medication Profile Division Preferences [PSO PMP SITE PREFERENCES]

This option allows the user to specify certain settings that will control how the *ePharmacy Medication Profile* option works for that user. Below is the list of settings that can be specified through this option:

- **EXP/CANCEL CUTOFF:** Indicates the maximum number of days for an expired and/or discontinued prescription to be cut from the profile.
- **SORT BY:** Indicates the default sorting column. The options are: Rx#, Drug Name, Issue Date or Last Fill Date.
- **SORT ORDER:** Indicates the order in which the column above will be sorted: Ascending or Descending.
- **DISPLAY SIG:** Indicates whether the SIG should be displayed under each prescription or if it should be hidden.
- **GROUP BY STATUS:** Indicates whether the list should be grouped by status (Active, Discontinued, Hold, etc...) or not.
- **DISPLAY ORDER COUNT:** Indicates whether the number of orders under each group should be displayed besides the group name. Example _____ACTIVE (3 orders)_____

```
Select ePharmacy Menu Option: PF ePharmacy Medication Profile Division
Preferences
     ALBANY ISC's current default view:
     EXP/CANCEL CUTOFF : 200 DAYS
     SORT BY : Rx#
SORT ORDER : ASCE
                       : ASCENDING
     DISPLAY SIG : ON
GROUP BY STATUS : OFF
     DISPLAY ORDER COUNT: OFF
     Delete this default view? NO// <Enter>
EXP/CANCEL CUTOFF: 200// <Enter> DAYS
SORT BY: RX// <Enter> Rx#
SORT ORDER: ASCENDING// ^EXP
EXP/CANCEL CUTOFF: 200// 120 DAYS
SORT BY: RX// <Enter> Rx#
SORT ORDER: ASCENDING// <Enter>
DISPLAY SIG: ON// <Enter>
GROUP BY STATUS: OFF// <Enter>
DISPLAY ORDER COUNT: OFF//<Enter>
Saving...OK!
```



If the there is a set of preferences already on file for the division the user is logged under, the option to delete such preferences is presented to the user as seen above.

ePharmacy Site Parameters

The ePharmacy Site Parameters file (#52.86) has been added to store ePharmacy Site parameters by division. Along with this, a new EPHARMACY SITE PARAMETERS [PSO ePHARM SITE

PARAMETERS] option has been added to the existing ePharmacy Menu [PSO EPHARMACY MENU].



This new option requires the PSORPH security key.

The following site parameters are definable using this option:

- ALLOW ALL REJECTS: Requires a YES or NO answer. It is highly suggested that No be answered at this prompt. Answering YES to this prompt will signify that all prescription fills with ePharmacy rejected claims will automatically be placed on the Third Party Payer Rejects Worklist, also known as the Pharmacy Reject Worklist. This is in addition to Refill-Too-Soon (79), Drug Utilization Review (DUR/88) and Tricare rejects which are automatically placed on the Pharmacy Reject Worklist. Any individually defined reject codes in this file will be overridden when a "YES" answer is given.
- REJECT WORKLIST DAYS: This is the number of days an uncommented reject can remain on the reject worklist without being included in the nightly reject worklist alert mail message.

The following prompts appear consecutively and the user may enter as many reject codes as they desire along with the manner in which each will be allowed to be placed on the reject worklist.

- REJECT CODE: A valid third party claim reject code should be entered. A listing of
 these codes is provided when double question marks(??) are entered for this prompt.
 Valid codes are contained within the BPS NCPDP REJECT CODES file (#900231.93).
 Also, a value defined in this field triggers definition of USER field (#2) and DATE OF
 LAST UPDATE field (#3). Any individually defined codes will be overridden when the
 ALLOW ALL REJECTS prompt is answered as YES.
- AUTO SEND: This prompt is a companion to the REJECT CODE prompt. Enter YES to allow the entered REJECT CODE to be automatically placed on the Pharmacy Reject Worklist or NO to require Outpatient Pharmacy Electronic Claims Coordinator (OPECC) intervention to do so. A null value will be treated the same as entering NO in this field.

The following is an example of definition of ePharmacy Site Parameters:

```
Select ePharmacy Menu Option: SP ePharmacy Site Parameters
Regardless of any parameters defined, Refill-Too-Soon, Drug Utilization
Review(DUR) and Tricare rejects will always be placed on the Third Party
Payer Rejects - Worklist, also known as Pharmacy Reject Worklist. These
parameters are uneditable and are the default parameters.
Division: ALBANY ISC 500
        ...OK? Yes// (Yes)
ALLOW ALL REJECTS: NO//
REJECT WORKLIST DAYS: 7
Select REJECT CODE: DAW ??
Select REJECT CODE: ??
   Choose from: (The following are previously defined reject code(s))
  22 M/I Dispense As Written (DAW)/Product Selection Co
     You may enter a new REJECT CODE, if you wish
*** Enter a valid third party reject code from the previously entered codes
*** above, enter a new code, or enter one from the provided listing below.
*** Valid codes are those defined in BPS NCPDP REJECT CODES file (#900231.93).
     A valid third party claim reject code should be entered. A listing
        of these codes is provided when double question marks are entered
        for this field.
   Choose from:
   10
         M/I Patient Gender Code
   11
            M/I Patient Relationship Code
   12
           M/I Place of Service
           M/I Other Coverage Code
   13
   14
            M/I Eligibility Clarification Code
            M/I Date of Service
   1.5
   16
           M/I Prescription/Service Reference Number
   17
            M/I Fill Number
   18
            M/I Metric Quantity
   19
           M/I Days Supply
   20
           M/I Compound Code
   21
            M/I Product/Service ID
   22
           M/I Dispense As Written (DAW)/Product Selection Code
   23
           M/I Ingredient Cost Submitted
   24
            M/I SALES TAX
   25
            M/I Prescriber ID
   26
           M/I Unit Of Measure
           (FUTURE USE)
Select REJECT CODE: 22
                            M/I Dispense As Written (DAW)/Product Selection C
ode
         ...OK? Yes// (Yes)
CODE: 22//
AUTO SEND: NO// Y YES
                        Prior Authorization Required
Select REJECT CODE: 75
        ...OK? Yes// (Yes)
CODE: 75//
AUTO SEND: NO//
Select REJECT CODE:
Division:
```

Third Party Payer Rejects - View/Process [PSO REJECTS VIEW/PROCESS]

This option provides information about third party payer rejects that have clinical significance, such as DUR and Refill Too Soon. This option allows the user to:

- View and resolve open, or UNRESOLVED rejects
- View closed, or RESOLVED rejects

The user can choose to view rejects for one, multiple, or all Outpatient Pharmacy Divisions.

Example: Viewing and Resolving Open Rejects

```
Select ePharmacy Menu Option: VP Third Party Payer Rejects - View/Process

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION: ^ALL
```

The user can select one of the following selections to filter the data displayed:

• DATE RANGE: Selects a date range (Default: Last 90 days).

```
BEGIN REJECT DATE: T-90// <Enter> (MAR 09, 2007)

END REJECT DATE: T// <Enter> (JUN 07, 2007)
```

- **PATIENT**: Selects a single patient, multiple patients, or all patients.
- **DRUG:** Selects a single drug, multiple drugs, or all drugs.
- **PRESCRIPTION NUMBER**: Selects a single prescription number, or multiple prescription numbers.
- **INSURANCE:** Selects a single insurance, multiple insurances, or all insurances.

Next, the user can choose to display either Unresolved, Resolved, or Both types of rejects.

Example: Viewing and Resolving Open Rejects (continued)

```
Select one of the following:

U UNRESOLVED

R RESOLVED

B BOTH

(U) NRESOLVED, (R) RESOLVED or (B) OTH REJECT statuses: B// <Enter> BOTH

Please wait...
```

Divisions: ALL	
DIVISIONS. AND	
Selection: ALL REJECTS FOR EMDEON	
# Rx# PATIENT(ID)[^] DRUG REASON	
1 100003872 OPPATIENT, FOUR (1322P A AND Z OINTMENT DUR:	
Payer Message:	
2 100003873 OPPATIENT, FOUR (1322P PHYTONADIONE 5MG TAB 79 : REFILL TO	OS C
Payer Message:	
3 100003873 OPPATIENT, FOUR (1322P PHYTONADIONE 5MG TAB DUR:	
Payer Message:	
4 100003785 OPPATIENT, TEN (3222) ALBUMIN 5% 250ML DUR:	
Payer Message:	
5 100003882 OPPATIENT, TEN (3222) ALBUTEROL INHALER DUR:	
Payer Message:	
6 100003884 OPPATIENT, TEN (3222) TEMAZEPAM 15MG CAP DUR:	
Payer Message:	
Select the entry # to view or ?? for more actions	
DR Sort by Drug RE Sort by Reason RX Sort by Prescription	
PA Sort by Patient RF Screen Refresh GI Group by Insurance	
Select: Quit//	

The following options are available on this screen:

- PA Sorts the list by the patient's last name.
- DR Sorts the list by the drug name.
- RE Sorts the list by the reject reason.
- RX Sorts the list by Prescription number.
- RF Refreshes the screen. (This selection retrieves DUR/ REFILL TOO SOON rejects that happened after the screen was originally populated.)
- GI Groups the rejects by Insurance Company name.



The following two sets of characters denote the order in which the list is being ordered by: $[^{\land}]$ for ascending and [v] for descending. The order inverses every time the user selects the same column that the list is already ordered by. Thus, if the list is currently ordered by Patient in an ascending order ($[^{\land}]$) and the user types "PA", the list will be resorted in descending order and the order indicator will change to ([v]).

The user selects a specific record to display all relevant information about the prescription and the claim submitted to the payer.

Example: Viewing and Resolving Open Rejects (continued)

```
Reject Information(UNRESOLVED)Nov 21, 2005@08:29:30
                                                           Page: 1 of
                                                         NPI#: 1712884
Division : ALBANY
Patient : OPPATIENT, FOUR (000-01-1322P) Sex: M
                                                         DOB: JAN 13,1922(83)
        : 100003873/0 ECME#: 0504455
                                                   Fill Date: Nov 15, 2005
Rx#
        : PHYTONADIONE 5MG TABS
                                                    NDC Code: 00006-0043-68
Drug
REJECT Information
Reject Type : 79 - REFILL TOO SOON received on NOV 15, 2005@14:13:51
Reject Status : OPEN/UNRESOLVED
Payer Message: NEXT RFL 111805, DAYS TO RFL 3, LAST FILL 101805 AT YOUR PHARM, REF
              ILL TOO SOON
            : ER (OVERUSE PRECAUTION )
Reason
DUR Text : RETAIL
OTHER REJECTS
29 - M/I Number Refills Authorized
39 - M/I Diagnosis Code
INSURANCE Information
Insurance : EMDEON
            : 1-800-555-5050
Contact
Group Name : RXINS
    Enter ?? for more actions
VW View Rx IGN Ignore Reject OVR Submit Override Codes MP Medication Profile RES Resubmit Claim CSD Change Suspense Date
Select: Next Screen// IGN Ignore Reject
   -----example continues-----
```

These options are available on the screen above:

- VW (View) Takes the user to the *View Prescription* option to review details for that prescription.
- MP (Medication Profile) Invokes the patient's list of medication.
- IGN (Ignore Reject) Allows the user to close or resolve the DUR/REFILL TOO SOON Reject without resubmission to the payer. The user will be required to enter a free-text comment and his/her electronic signature.
- RES (Resubmit Claim) Allows the user to re-submit the claim to the payer. This will automatically mark the reject resolved.
- OVR (Submit Override Codes) Allows the user to re-submit the claim by entering NCPDP override codes, which shall trigger a new claim submission be sent to the payer.
- CSD (Change Suspense Date) Allows the user to change the fill date for suspended prescriptions. The user will not be allowed to enter a suspense date that is greater than the fill date plus 90 days. Dates where the fill date plus 90 days is greater than the expiration date will not be allowed entry, and dates prior to issue date will not be allowed.

- Hidden actions:
- COM (Add Comments) Allows the user to add reject specific comments. This comments are local to the Reject Worklist and View/Process options and are not transmitted to ECME.
- CLA (Submit Clarif. Code) Allows the user to re-submit a claim with Clarification Codes.
- ED (Edit Rx hidden action) Allows the user to edit the prescription.
- PA (Submit Prior Auth.) Allows the user to re-submit a claim with Prior Authorization information.

Example: Viewing and Resolving Open Rejects (continued)

```
Enter your Current Signature Code: SIGNATURE VERIFIED

Comments: Changed quantity

When you confirm this REJECT will be marked RESOLVED.

Confirm? ? NO// Y YES [Closing...OK]
```

The following is a sample of the ECME Activity Log update that occurs when a reject is resolved:

Example: ECME Activity Log entry: Reject Resolved

Rx Activity Log	Nov	21, 2005@09:43	:33	Page:	3 of	3
OPPATIENT, FOUR						
PID: 000-01-1322P			Ht(cm):	(_)	
DOB: JAN 13,1922 (83)			Wt(kg):	(_)	
+						
1 11/15/05@14:13:52						
Comments: Submitted to E	CME:REJECT	WORKLIST-DUR	OVERRIDE CODE	S(DD/M0/	/1B) -E	
PAYABLE						
DOME DE TROPE I						
ECME REJECT Log:	D D £	Dadaat Mana	O M A MITO	Da+- /m-	D	1
# Date/Time Rcvd		Reject Type	STATUS		ime kesoi	.vea
1 12/11/05@19:03:31	ORIGINAL	DUR	RESOLVED	12/12/0)5@16:45:	21
Comments: CLAIM RE-SUBMI		2011	1,2002,25	10/10/	,0010.	
2 5/30/06@19:13:57	REFILL 2	DUR	RESOLVED	5/31/06		32
Comments: CLAIM RE-SUBMI	TTED					
Enter ?? for m	ore action	S				
Select Action:Quit//						

Third Party Payer Rejects - Worklist [PSO REJECTS WORKLIST]

This option gives the user the ability to process Third Party Payer Rejects and TRICARE Non-billable rejects for one, multiple, or all Outpatient Pharmacy Divisions. Only OPEN/UNRESOLVED rejects that have clinical significance, such as DUR and Fill Too Soon, are added to the Worklist. Once the reject is marked CLOSED/RESOLVED, it is automatically removed from the Worklist.

Example: Resolving Open Rejects

```
Select Rx (Prescriptions) Option: EPHARMACY Menu
         Ignored Rejects Report
   MP
          ePharmacy Medication Profile (View Only)
   NV
        NDC Validation
   PF
        ePharmacy Medication Profile Division Preferences
   SP
       ePharmacy Site Parameters
Third Party Payer Rejects - View/Process
   VP
        Third Party Payer Rejects - Worklist
   WL
   TC
         TRICARE Bypass/Override Report
Select ePharmacy Menu Option: WL Third Party Payer Rejects - Worklist
You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.
DIVISION: ^ALL
Insurance Rejects - Worklist Nov 09, 2010@11:24:10 Page:
                                                                            1 of 1
Divisions: ALL
Selection: ALL UNRESOLVED REJECTS

        # Rx#
        PATIENT(ID)[^]
        DRUG
        REASON

        1 00003521
        OPPATIENT, TWELVE (5444)
        ACETYLCYSTEINE 20% 3 79 : REFILL TOO SO

   Payer Message: PLAN = 8906 NEXT FILL: 20050429
  2 100003521 OPPATIENT, TWELVE (5444) ACETYLCYSTEINE 20% 3 79 : REFILL TOO SO Payer Message: RTS - Rx: 9306343 DT: 31-MAR-2005 DS: 30 RD: 23-APRIL 2005
  3 100003872 OPPATIENT, FOUR (1322P) A AND Z OINTMENT
    Payer Message: DUR Reject Error
                              TRICARE - Non-DUR/RTS
  4 101359 OPTRICARE, ONE (7894)
                                            BACLOFEN 10MG TABS 07 :M/I Cardholde
    Payer Message:
  5 100924 OPTRICARE, TRI (4932) LORAZEPAM 1MG TAB 07 :M/I Cardholde
    Payer Message:
                                   OTHER REJECTS
  6 101173 IBPATIENT, ONE (9877) FENOPROFEN 300MG CAP 08 :M/I Person Co
    Payer Message:
  7 101130 OPPATIENT, ONE (4589) CHLORAMBUCIL 2MG TAB NN : Transaction R
    Payer Message:
          Select the entry # to view or ?? for more actions
DR Sort by Drug RE Sort by Reason RX Sort by Prescription PA Sort by Patient RF Screen Refresh GI Group by Insurance
Select: Quit// 3
```

-----example continues------

These options are available on the following screen:

- VW (View) Takes the user to the *View Prescription* option to review details for that prescription.
- MP (Medication Profile) Invokes the patient's list of medication.
- IGN (Ignore Reject) Allows the user to close or resolve the DUR/REFILL TOO SOON Reject without resubmission to the payer. The user will be required to enter a free-text comment and his/her electronic signature.
- RES (Resubmit Claim) Allows the user to re-submit the claim to the payer. This will automatically mark the reject resolved.
- OVR (Submit Override Codes) Allows the user to re-submit the claim by entering NCPDP override codes, which shall trigger a new claim submission be sent to the payer.
- CSD (Change Suspense Date) Allows the user to change the fill date for suspended prescriptions.

Example: Resolving Open Rejects (continued)

```
Reject Information (UNRESOLVED) Nov 21, 2005@09:51:15 Page: 1 of 1
Patient : OPPATIENT, FOUR(000-01-1322P) Sex: M DOB: JAN 13,1922(8 Rx# : 100003872/0 ECME#: 0504454 Fill Date: Nov 15, 2005 Drug : A AND Z OINTMENT
                                                                  DOB: JAN 13,1922(83)
                                                            NDC Code: 00085-0096-04
REJECT Information
Reject Type : 88 - DUR REJECT received on NOV 15, 2005@14:11:51
Reject Status : OPEN/UNRESOLVED
Payer Message : DUR Reject Error
Reason : UNNECESSARY DRUG
DUR Text : RETAIL
INSURANCE Information
Insurance : EMDEON
Contact :
Group Name : RXINS
Group Number : 12454
Cardholder ID : 000011322P
          Enter ?? for more actions
VW View Rx IGN Ignore Reject OVR Submit Override Codes
MP Medication Profile RES Resubmit Claim CSD Change Suspense Date
Select: Quit// OVR Override Reject
  -----example continues------
```

When a claim is rejected, typically the Payer provides a "Reason for Service Code", which displays on the reject as "Reason". The user can use this reason to then select which code is entered for "Professional Service Code" and "Result of Service Code".

Available codes for "Professional Service Code" include:

Code	Description
00	NO INTERVENTION
AS	PATIENT ASSESSMENT
CC	COORDINATION OF CARE
DE	DOSING EVALUATION/DETERMINATION
FE	FORMULARY ENFORCEMENT
GP	GENERIC PRODUCT SELECTION
M0	PRESCRIBER CONSULTED
MA	MEDICATION ADMINISTRATION
MR	MEDICATION REVIEW
P0	PATIENT CONSULTED
PE	PATIENT EDUCATION/INSTRUCTION
PF	PATIENT REFERRAL
PH	PATIENT MEDICATION HISTORY
PM	PATIENT MONITORING
R0	PHARMACIST CONSULTED OTHER SOURCE
RT	RECOMMENDED LABORATORY TEST
SC	SELF-CARE CONSULTATION
SW	LITERATURE SEARCH/REVIEW
TC	PAYER/PROCESSOR CONSULTED
TH	THERAPEUTIC PRODUCT INTERCHANGE

Available codes for "Result of Service Code" include:

Code	Description
00	NOT SPECIFIED
1A	FILLED AS IS, FALSE POSITIVE
1B	FILLED PRESCRIPTION AS IS
1C	FILLED, WITH DIFFERENT DOSE
1D	FILLED, WITH DIFFERENT DIRECTIONS
1E	FILLED, WITH DIFFERENT DRUG
1F	FILLED, WITH DIFFERENT QUANTITY
1G	FILLED, WITH PRESCRIBER APPROVAL
1H	BRAND-TO-GENERIC CHANGE
1 J	RX-TO-OTC CHANGE
1K	FILLED, WITH DIFFERENT DOSAGE FORM
2A	PRESCRIPTION NOT FILLED
2B	NOT FILLED, DIRECTIONS CLARIFIED
3A	RECOMMENDATION ACCEPTED
3B	RECOMMENDATION NOT ACCEPTED
3C	DISCONTINUED DRUG
3D	REGIMEN CHANGED
3E	THERAPY CHANGED
3F	THERAPY CHANGED - COST INCREASE ACKNOWLEDGED
3G	DRUG THERAPY UNCHANGED
3H	FOLLOW-UP REPORT
3J	PATIENT REFERRAL
3M	COMPLIANCE AID PROVIDED

Example: Resolving Open Rejects (continued)

```
Professional Service Code: MR MEDICATION REVIEW
Result of Service Code : 1D
                                   FILLED, WITH DIFFERENT DIRECTIONS
     Reason for Service Code : NN - UNNECESSARY DRUG
     Professional Service Code: MR - MEDICATION REVIEW
     Result of Service Code : 1D - FILLED, WITH DIFFERENT DIRECTIONS
     When you confirm, a new claim will be submitted for
     the prescription and this REJECT will be marked
     resolved.
     Confirm? ? YES// <Enter>
Prescription 100003872 successfully submitted to ECME for claim generation.
Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Waiting to process response
E PAYABLE
```

The following is a sample of the ECME Activity Log update that occurs when a reject is resolved.

Example: ECME Activity Log entry: Reject Resolved

Rx Activity Log	Nov	21, 2005	5@11:11:53		Page: 3	of 3
OPPATIENT, FOUR PID: 000-01-1322P DOB: JAN 13,1922 (83)				Ht(cm): Wt(kg):)
# Date/Time	Rx Ref	Ir	nitiator O	f Activity		
ECME Log: 1 11/15/05@14:08:35 Comments: ECME: WINDOW 2 11/21/05@11:01:37 Comments: ECME: DUR OVE	FILL(NDC: 0 ORIGINAL RRIDE CODES	0085-009 OI (MR/NN/1	96-04)-pop: PPHARMACIS' LD)-popP II	P INSURANC T4,THREE NSURANCE		
# Date/Time Rcvd	Rx Ref	Reject	Type 	STATUS	Date/Time	Resolved
1 12/11/05@19:03:31 Comments: CLAIM RE-SUBM		DUR		RESOLVED	12/12/05@	16:45:21
2 5/30/06@19:13:57 Comments: CLAIM RE-SUBM		DUR		RESOLVED	5/31/06@	15:58:32
Enter ?? for	more action	.s				
Select Action:Quit//						

The following is an example of a prescription being resolved for prior authorization submission.

Example: Prior Authorization Submission

```
Reject Information (UNRESOLVED) Nov 21, 2005@09:51:15
                                                            Page: 1 of 1
Division : ALBANY
Patient : OPPATIENT, FOUR (000-01-1322P) Sex: M

Rx# : 100003872/0 ECME#: 0504454 Fill Date: Nov 15, 2005
Drug : A AND Z OINTMENT
                                                           DOB: JAN 13,1922(83)
        : A AND Z OINTMENT
                                                      NDC Code: 00085-0096-04
Drug
REJECT Information
Reject Type : 88 - DUR REJECT received on NOV 15, 2005@14:11:51
Reject Status : OPEN/UNRESOLVED
Payer Message : DUR Reject Error
Reason : UNNECESSARY DRUG
DUR Text : RETAIL
INSURANCE Information
Insurance : EMDEON
Contact
Group Name : RXINS
Group Number : 12454
Cardholder ID: 000011322P
          Enter ?? for more actions
VW View Rx IGN Ignore Reject RES Resubmit Claim
MP Medication Profile OVR Override DUR Reject CSD Change Suspense
Select: Quit// ??
The following actions are also available:
COM Add Comments DN Down a Line
                                              PS Print Screen
CLA Submit Clarif. Code > Shift View to Right PL Print List
ED
   Edit Rx < Shift View to Left SL Search List
PA Submit Prior Auth. FS First Screen ADPL Auto Display(On/Off)
+ Next Screen LS Last Screen QU Quit
- Previous Screen GO Go to Page
UP Up a Line RD Re Display Screen
Select: Quit// PA
                      Send Prior Auth.
  Prior Authorization Type: 0// ?
Choose from:
0 NOT SPECIFIED
1
        PRIOR AUTHORIZATION #
2
       ML-MEDICAL CERTIFIED
       EPSDT
3
       EXEMPT FROM COPAY
4
       EXEMPT FROM RX LIMITS
5
        FAMILY PLANNING
        AFDC
8
        PAYER DEFINED EXEMPTION
-----example continues-----
```

Example: Prior Authorization Submission (continued)

```
Prior Authorization Type: 0// 1 PRIOR AUTHORIZATION #
Prior Authorization Number: 12345678901

When you confirm, a new claim will be submitted for the prescription and this REJECT will be marked resolved.

Confirm? ? YES// <Enter>

Prescription 787480 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
```

Example: Clarification Code Submission

The following is an example of a prescription being resolved for code clarification submission.

```
Reject Information (UNRESOLVED) Nov 21, 2005@09:51:15
                                                             Page:
                                                                      1 of 1
Division : ALBANY
                                                              NPI#: 1712884
Patient : OPPATIENT, FOUR (000-01-1322P) Sex: M DOB: JAN 13,1922 (8 Rx# : 100003872/0 ECME#: 0504454 Fill Date: Nov 15, 2005
                                                             DOB: JAN 13,1922(83)
         : A AND Z OINTMENT
                                                       NDC Code: 00085-0096-04
Drua
REJECT Information
Reject Type : 88 - DUR REJECT received on NOV 15, 2005@14:11:51
Reject Status : OPEN/UNRESOLVED
Payer Message : DUR Reject Error
Reason : UNNECESSARY DRUG
DUR Text : RETAIL
INSURANCE Information
Insurance : EMDEON
Contact
Group Name : RXINS
Group Number : 12454
Cardholder ID: 000011322P
          Enter ?? for more actions
VW View Rx
                    IGN Ignore Reject RES Resubmit Claim
MP Medication Profile OVR Override DUR Reject CSD Change Suspense
Select: Quit// ??
The following actions are also available:
```

Outpatient Pharmacy V. 7.0 Manager's User Manual

Example: Clarification Code Submission (continued)

```
Select: Quit// CLA Send Clarif. Code
Submission Clarification Code : ?
Choose from:
  NOT SPECIFIED
NO OVERRIDE
1
2
       OTHER OVERRIDE
3
       VACATION SUPPLY
        LOST PRESCRIPTION
5
        THERAPY CHANGE
6
        STARTER DOSE
7
       MEDICALLY NECESSARY
8
        PROCESS COMPOUND
9
        ENCOUNTERS
99
        OTHER
Submission Service Code : 3 VACATION SUPPLY
     When you confirm, a new claim will be submitted for
     the prescription and this REJECT will be marked
     resolved.
     Confirm? ? YES// <Enter>
Prescription 787480 successfully submitted to ECME for claim generation.
Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
```

Example: Rejected Prescription -Adding Comments

The following is an example of comments added to a rejected prescription.

```
Select: Quit// ??

The following actions are also available:

COM Add Comments DN Down a Line PS Print Screen

CLA Submit Clarif. Code > Shift View to Right PL Print List

ED Edit Rx < Shift View to Left SL Search List

PA Submit Prior Auth. FS First Screen ADPL Auto Display(On/Off)

+ Next Screen LS Last Screen QU Quit

- Previous Screen GO Go to Page

UP Up a Line RD Re Display Screen

Select: Quit// COM Add Comments

Comment: ALREADY CALLED INSURANCE COMPANY AND THEY WILL GET

BACK TO ME ON MONDAY.
```

```
Reject Information (UNRESOLVED) Nov 21, 2005@09:51:15
                                                              Page: 1 of
                                                            NPI#: 1712884
Division : ALBANY
Patient : OPPATIENT, FOUR (000-01-1322P) Sex: M
                                                            DOB: JAN
13,1922(83)
Rx# : 100003872/0 ECME#: 0504454
                                                     Fill Date: Nov 15, 2005
                                                      NDC Code: 00085-0096-04
Drug
       : A AND Z OINTMENT
REJECT Information
Reject Type : 88 - DUR REJECT received on NOV 15, 2005@14:11:51
Reject Status : OPEN/UNRESOLVED
Payer Message : DUR Reject Error
Reason : UNNECESSARY DRUG
DUR Text : RETAIL
COMMENTS
- JUN 2, 2007@2:30:10 - ALREADY CALLED INSURANCE COMPANY AND THEY WILL GET
 BACK TO ME ON MONDAY (OPUSER, ONE)
INSURANCE Information
Insurance : EMDEON
Contact
Group Name : RXINS
Group Number : 12454
Cardholder ID: 000011322P
          Enter ?? for more actions
VW View Rx IGN Ignore Reject RES Resubmit Claim MP Medication Profile OVR Override DUR Reject CSD Change Suspense
Select: Quit//
```

TRICARE Bypass/Override Report

[PSO Bypass/Override Report]

This option provides information in a detail or summary report format that will list prescriptions where the Bypass or Override was performed to enable processing of these prescriptions. The user has the ability to process TRICARE (I)npatient; TRICARE (N)on-Billable Product; TRICARE (R)eject Override; or(A)ll. Besides allowing the selection of all types, the report allows the selection of one or two types. For example, the user can select Non-billable and Reject for the same report.

- Date of Action (user-defined date range)
- Summary or Detail
- Subtotals of number of Rxs and bill cost available by Pharmacist or Provider
- Grand total number of Rxs contained in the report
- Grand total bill cost of the Rxs contained in the report



This menu option is locked with the PSO TRICARE MGR security key.

Example: Accessing the TRICARE Bypass/Override Report

```
Select Rx (Prescriptions) Option: epharmacy Menu
        Ignored Rejects Report
         ePharmacy Medication Profile (View Only)
  MP
  NV
         NDC Validation
  PF
         ePharmacy Medication Profile Division Preferences
         ePharmacy Site Parameters
   SP
   VP
         Third Party Payer Rejects - View/Process
          Third Party Payer Rejects - Worklist
          TRICARE Bypass/Override Report
You've got PRIORITY mail!
Select ePharmacy Menu Option: TC TRICARE Bypass/Override Report
     Select one of the following:
                   DIVISION
         D
                   ALL
Select Certain Pharmacy (D) ivisions or (A) LL:
```

Example: TRICARE Audit Report Filters and Data Elements

```
Select one of the following:
                    DIVISION
                   ALL
         Α
Select Certain Pharmacy (D)ivisions or (A)LL: DIVISION
Select ECME Pharmacy Division(s): BATTLE CREEK
 Selected:
         BATTLE CREEK
Select ECME Pharmacy Division(s): GRAND RAPIDS MI CBOC 515BY
                                                                      VA GRAND RAPIDS OPC 515BY
VA GRAND RAPIDS OPC
 Selected:
         BATTLE CREEK
         VA GRAND RAPIDS OPC
Select ECME Pharmacy Division(s):
    Select one of the following:
        S Summary
D Detail
Display (S) ummary or (D) etail Format: Detail//
START WITH A ACTION DATE: T-1// T-10 (APR 30, 2010)

GO TO ACTION DATE: T// T-9 (MAY 01, 2010)
     Select one of the following: ** The user will be able to select multiples -- limit of two**
                    TRICARE INPATIENT
                 TRICARE NON-BILLABLE
                TRICARE REJECT OVERRIDE ALL
         R
         Α
Include TRICARE (I)npatient, TRICARE (N)on-Billable, TRICARE (R)eject or (A)ll: <no default>
   Select one of the following:
             Specific Pharmacist(s)
ALL Pharmacists
Select Specific Pharmacist(s) or include ALL Pharmacists: ALL//
   Select one of the following:
        S Specific Provider(s)
A ALL Providers
Select Specific Provider(s) or include ALL Providers: ALL//
Group/Subtotal Report by Pharmacy (R) Pharmacist or (P) rovider: <no default>
Do you want to capture report data for an Excel document? NO//
WARNING - THIS REPORT REQUIRES THAT A DEVICE WITH 132 COLUMN WIDTH BE USED.
IT WILL NOT DISPLAY CORRECTLY USING 80 COLUMN WIDTH DEVICES
DEVICE: HOME// 0;132;99 INCOMING TELNET
Please wait...
```

- ** When selecting from above, Specific Pharmacist (s), the user will be able to continue selecting Pharmacist (s) as necessary. This filter will have the same functionality as the Division/Insurance Company selection filters.
- ** When selecting from above, Specific Provider (s), the user will be able to continue selecting Provider (s) as necessary. This filter will have the same functionality as the Division/Insurance Company selection filters.

Example of TRICARE Audit Report Summary

TRICARE BYPASS/OVERRIDE AUDIT REPORT -	SUMMARY Print Date: NOV 10, 2010@10:05:26	PAGE: 1
DIVISION(S): ALL		
TC TYPES: TRICARE INPATIENT, TRICARE NON-	B <mark>illable product, tricare reject override</mark>	
ALL PRESCRIPTIONS BY AUDIT DATE: From 10/	3 <mark>1/10 through 11/10/10</mark>	
		<mark>=====</mark>
		<mark></mark>
DIVISION: DIVISION ONE		
TRICARE	INPATIENT ********************	
TRICARE INPATIENT		
SUBTOTALS	11.93	
RX COUNT	1	
MEAN	11.93	
******* TRICARE	NON-BILLABLE PRODUCT ************************************	
PHARMACIST: OPPHARM, ONE		
SUB-TOTALS	8 <mark>.03</mark>	
RX COUNT	1	
MEAN	8.03	
MDICADE NON DILLADIE DDODICE		
TRICARE NON-BILLABLE PRODUCT SUBTOTALS	8.03	
RX COUNT	0.03 1	
MEAN	8.03	
PHD/IIV		
******* TRICARE	REJECT OVERRIDE ***************	
PHARMACIST: OPPHARM, TWO		
SUB-TOTALS	29.17	
RX COUNT	3	
MEAN	9 <mark>.72</mark>	
DUI DUI GEORGE GERMANU MURE		
PHARMACIST: OPPHARM, THREE	10.20	
SUB-TOTALS RX COUNT	10.38 1	
RX COUNT MEAN	10.38	
PIDAN	10.30	
TRICARE REJECT OVERRIDE		
SUBTOTALS	39.55	
RX COUNT	4	
MEAN	9.89	

DIVISION DIVISION ONE	
SUBTOTALS	59 . 51
RX COUNT	6
MEAN	9.92
GRAND TOTALS	5 <mark>9.51</mark>
RX COUNT	<mark>6</mark>
MEAN CONTRACTOR OF THE PROPERTY OF THE PROPERT	9.92
REPORT HAS FINISHED	
Press Return to continue, '^' to exit:	

Example of TRICARE Bypass/Override Audit Report Detail

09/10/10 OPPHARM, ONE 20.00 180 06XXX-3XXX-XX DOCUSATE NA 100MG CA eT TRICARE DRUG NOT BILLABLE Fill Per Provider OPPHARM, ONE SUB-TOTALS 20.00 RX COUNT 1 MEAN 20.00 TRICARE NON-BILLABLE PRODUCT SUBTOTALS 20.00 RX COUNT 1 MEAN 20.00 *********************************	VISION(S): DIVISION ONE, DIVISI TYPES: INPATIENT, NON-BILLABLE	PRODUCT, REJECT		vision		
ACTION DATE USER NAME SHILLED QTY NDC# DRUG VISION: DIVISION ONE ***TRICARE INPATIENT** ***PATIENT, TRIONE/XXXX	PRESCRIPTIONS BY ACTION DATE:	From 09/01/10 t	through 09/30/10			
TRICARE INPATIENT PATIENT, TRIONE/XXXX 10750XXXX\$ 0/9300XXX 09/10/10 C RT ACT/NR 09/10/10 POSTMASTER 45.00 180 06XXX-3XXX-XX METFORMIN HCL 500MG TAB TRICARE INPATIENT SUBTOTALS 45.00 RX COUNT 1 MEAN 45.00 TRICARE NON-BILLABLE PRODUCT PATIENT, TRITWO/XXXX 1075XXXXX\$ 0/930XXXX 09/10/10 C RT ACT/NR 09/10/10 OPPHARM, ONE 20.00 180 06XXX-3XXX-XX DOCUSATE NA 100MG CA ET TRICARE DRUG NOT BILLABLE PILL PEP PROVIDER OPPHARM, ONE SUB-TOTALS 20.00 TRICARE NON-BILLABLE PRODUCT SUB-TOTALS 20.00 TRICARE NON-BILLABLE PRODUCT SUB-TOTALS 20.00 TRICARE NON-BILLABLE PRODUCT SUB-TOTALS 20.00 TRICARE NON-BILLABLE PRODUCT SUB-TOTALS 20.00 TRICARE NON-BILLABLE PRODUCT SUB-TOTALS 20.00 TRICARE NON-BILLABLE PRODUCT SUB-TOTALS 20.00 TRICARE RON-BILLABLE PRODUCT SUB-TOTALS 20.00 TRICARE NON-BILLABLE PRODUCT SUB-TOTALS 20.00 TRICARE RON-BILLABLE PRODUCT SUB-TOTALS 20.00 TRICARE NON-BILLABLE PRODUCT SUB-TOTALS 20.00 T		RX#				DRUG
TRICARE INPATIENT *** 09/10/10						=======
PATIENT, TRIONE/XXXX 10750XXXX\$ 0/9300XXX 09/10/10 C RT ACT/NR 09/10/10 POSTMASTER 45.00 180 06XXX-3XXX-XX METFORMIN HCL 500MG TAE TRICARE INPATIENT SUBPOTALS 45.00 RX COUNT 1 MEAN 45.00 TRICARE NON-BILLABLE PRODUCT*** PATIENT, TRITMO/XXXX 1075XXXX\$ 0/930XXXX 09/10/10 C RT ACT/NR 09/10/10 OPPHARM, ONE 20.00 180 06XXX-3XXX-XX DOCUSATE NA 100MG CA FILL PER PROVIDED TRICARE NON-BILLABLE PRODUCT 1 MEAN 20.00 TRICARE NON-BILLABLE PRODUCT 1 MEAN 20.00 TRICARE REJECT OVERRIDE PATIENT, TRITFOUR/XXXX 0PPHARM, ONE 20.00 TRICARE REJECT OVERRIDE PATIENT, TRITFOUR/XXXX 0PPHARM, ONE 20.00 TRICARE REJECT OVERRIDE PATIENT, TRIFFOUR/XXXX 0PPHARM, ONE 20.00 180 06524-3288-09 DOCUSATE NA 100MG CA TRICARE REJECT OVERRIDE PATIENT, TRIFFOUR/XXXX 0PPHARM, ONE 20.00 180 06524-3288-09 DOCUSATE NA 100MG CA						
09/10/10 POSTMASTER 45.00 180 06XXX-3XXX-XX METFORMIN HCL 500MG TAE TRICARE INPATIENT SUBTOTALS 45.00 EX COUNT 1 MEAN 45.00 PATIENT, TRITWO/XXXX 1075XXXXX\$ 0/930XXXX 09/10/10 C RT ACT/NR 09/10/10 0PPHARM, ONE 20.00 180 06XXX-3XXX-XX DOCUSATE NA 100MG CA ET TRICARE DRUG NOT BILLABLE Fill Per Provider TRICARE NON-BILLABLE FILL PER PRODUCT TRICARE NON-BILLABLE FILL PER PRODUCT TRICARE NON-BILLABLE PRODUCT SUBTOTALS 20.00 RX COUNT 1 MEAN 20.00 TRICARE REJECT OVERIDE PATIENT, TRIFOUR/XXXX 0/910/10 C RT ACT/NR 09/10/10 0PPHARM, ONE 20.00 TRICARE REJECT OVERIDE PATIENT, TRIFOUR/XXXX 0/910/10 C RT ACT/NR 09/10/10 0PPHARM, ONE 0/930XXXX 0/910/10 C RT ACT/NR 09/10/10 0PPHARM, ONE 0/930XXXX 0/930XXXX 0/910/10 C RT ACT/NR 09/10/10 0PPHARM, ONE 0/930XXXX 0/930XXXX 0/910/10 C RT ACT/NR 09/10/10 0PPHARM, ONE 0/930XXXX 0/930XXXX 0/910/10 C RT ACT/NR 09/10/10 0PPHARM, ONE 0/930XXXX 0/930XXXX 0/910/10 C RT ACT/NR 09/10/10 0PPHARM, ONE 0/930XXXX 0/930XXXX 0/910/10 C RT ACT/NR 09/10/10 0PPHARM, ONE 0/930XXXX 0/930XXXX 0/910/10 C RT ACT/NR 09/10/10 0PPHARM, ONE 0/930XXXX 0/930XXXX 0/910/10 C RT ACT/NR 09/10/10 0PPHARM, ONE 0/930XXXX 0/930XXXX 0/910/10 C RT ACT/NR 09/10/10 0PPHARM, ONE 0/930XXXX 0/930XXXX 0/930XXXX 0/930XXX 0/93XXX 0	*******	TRICARE INPATIEN	NT *********	*****	<mark>* * * * *</mark>	
TRICARE INPATIENT SUBTOTALS		10750XXXX\$				
TRICARE INPATIENT SUBTOTALS RX COUNT TRICARE NON-BILLABLE PRODUCT*** TRICARE NON-BILLABLE PRODUCT*** O9/10/10 OPPHARM,ONE TRICARE DRUG NOT BILLABLE Fill Per Provider OPPHARM,ONE SUB-TOTALS RX COUNT RX COUNT MEAN TRICARE NON-BILLABLE PRODUCT SUBTOTALS SUBTOTALS SUBTOTALS SUBTOTALS SUBTOTALS SUBTOTALS SUBTOTALS SUBTOTALS TRICARE NON-BILLABLE PRODUCT SUBTOTALS O9/10/10 TRICARE REJECT OVERRIDE TRICA			45.00	180	06XXX-3XXX-XX	METFORMIN HCL 500MG TAB
SUBTOTALS RX COUNT REAN ***********************************	TRICARE Inpatient/Discharge					
RX COUNT	TRICARE INPATIENT					
MEAN	SUBTOTALS					
TRICARE NON-BILLABLE PRODUCT************************************	RX COUNT		1			
PATIENT, TRITWO/XXXX 1075XXXXX\$ 0/930XXXX 09/10/10 C RT ACT/NR 09/10/10 OPPHARM, ONE 20.00 180 06XXX-3XXX-XX DOCUSATE NA 100MG CA eT TRICARE DRUG NOT BILLABLE Fill Per Provider OPPHARM, ONE SUB-TOTALS 20.00 RX COUNT 1 MEAN 20.00 TRICARE NON-BILLABLE PRODUCT SUBTOTALS 20.00 RX COUNT 1 MEAN 20.00 *********************************	MEAN		45.00			
### TRICARE DRUG NOT BILLABLE Fill Per Provider OPPHARM, ONE SUB-TOTALS SUB-	*********	RICARE NON-BILL	ABIE PRODUCT******	*****	****	
OPPHARM, ONE SUB-TOTALS 20.00 RX COUNT 1 MEAN 20.00 TRICARE NON-BILLABLE PRODUCT SUBTOTALS 20.00 RX COUNT 1 MEAN 20.00 *********************************	PATIENT, TRITWO/XXXX	1075xxxxx\$	0/930xxxx			
SUB-TOTALS RX COUNT RX COUNT MEAN TRICARE NON-BILLABLE PRODUCT SUBTOTALS RX COUNT MEAN 1 MEAN 20.00 *******************************	PATIENT, TRITWO/XXXX 09/10/10 OPPHARM, ONE	1075xxxxx\$	0/930xxxx			
SUB-TOTALS RX COUNT RX COUNT MEAN 20.00 TRICARE NON-BILLABLE PRODUCT SUBTOTALS RX COUNT HEAN 20.00 RX COUNT 1 MEAN 20.00 *******************************	PATIENT,TRITWO/XXXX 09/10/10 OPPHARM,ONE eT TRICARE DRUG NOT BILLABLE	1075xxxxx\$	0/930xxxx			
RX COUNT	PATIENT, TRITWO/XXXX 09/10/10 OPPHARM, ONE ET TRICARE DRUG NOT BILLABLE Fill Per Provider	1075xxxxx\$	0/930xxxx			
MEAN 20.00 TRICARE NON-BILLABLE PRODUCT SUBTOTALS 20.00 RX COUNT 1 MEAN 20.00 *********************************	PATIENT, TRITWO/XXXX 09/10/10 OPPHARM, ONE eT TRICARE DRUG NOT BILLABLE Fill Per Provider OPPHARM, ONE	1075xxxxx\$	0/930xxxx 20.00			
SUBTOTALS RX COUNT MEAN ************************** ********	PATIENT, TRITWO/XXXX 09/10/10 OPPHARM, ONE ET TRICARE DRUG NOT BILLABLE Fill Per Provider OPPHARM, ONE SUB-TOTALS	1075xxxxx\$	0/930xxxx 20.00			
SUBTOTALS RX COUNT MEAN 20.00 *******************************	PATIENT, TRITWO/XXXX 09/10/10 OPPHARM, ONE ET TRICARE DRUG NOT BILLABLE Fill Per Provider OPPHARM, ONE SUB-TOTALS RX COUNT	1075xxxxx\$	0/930XXXX 20.00			
SUBTOTALS RX COUNT MEAN 20.00 *******************************	PATIENT, TRITWO/XXXX 09/10/10 OPPHARM, ONE ET TRICARE DRUG NOT BILLABLE Fill Per Provider OPPHARM, ONE SUB-TOTALS RX COUNT	1075xxxxx\$	0/930XXXX 20.00			
RX COUNT 1 20.00 *********************************	PATIENT, TRITWO/XXXX 09/10/10 OPPHARM, ONE ET TRICARE DRUG NOT BILLABLE Fill Per Provider OPPHARM, ONE SUB-TOTALS RX COUNT MEAN	1075xxxxx\$	0/930XXXX 20.00			
**************************************	PATIENT, TRITWO/XXXX 09/10/10 OPPHARM, ONE ET TRICARE DRUG NOT BILLABLE Fill Per Provider OPPHARM, ONE SUB-TOTALS RX COUNT MEAN TRICARE NON-BILLABLE PRODUCT	1075xxxxx\$	0/930xxxx 20.00 20.00 1 20.00			
PATIENT, TRIFOUR/XXXX 107XXXX0B\$ 0/930XXXX 09/10/10 C RT ACT/NR 09/10/10 OPPHARM, ONE 20.00 180 06524-3288-09 DOCUSATE NA 100MG CA 50:Non-Matched Pharmacy Number	PATIENT, TRITWO/XXXX 09/10/10 OPPHARM, ONE ET TRICARE DRUG NOT BILLABLE Fill Per Provider OPPHARM, ONE SUB-TOTALS RX COUNT MEAN TRICARE NON-BILLABLE PRODUCT SUBTOTALS	1075xxxxx\$	0/930XXXX 20.00 20.00 1 20.00			
PATIENT, TRIFOUR/XXXX 107XXXX0B\$ 0/930XXXX 09/10/10 C RT ACT/NR 09/10/10 OPPHARM, ONE 20.00 180 06524-3288-09 DOCUSATE NA 100MG CA 50:Non-Matched Pharmacy Number	PATIENT, TRITWO/XXXX 09/10/10 OPPHARM, ONE ET TRICARE DRUG NOT BILLABLE Fill Per Provider OPPHARM, ONE SUB-TOTALS RX COUNT MEAN TRICARE NON-BILLABLE PRODUCT SUBTOTALS RX COUNT	1075xxxxx\$	0/930XXXX 20.00 20.00 1 20.00			
09/10/10 OPPHARM,ONE 20.00 180 06524-3288-09 DOCUSATE NA 100MG CA 50:Non-Matched Pharmacy Number	PATIENT, TRITWO/XXXX 09/10/10 OPPHARM, ONE eT TRICARE DRUG NOT BILLABLE Fill Per Provider OPPHARM, ONE SUB-TOTALS RX COUNT MEAN TRICARE NON-BILLABLE PRODUCT SUBTOTALS RX COUNT MEAN	1075xxxxx\$	0/930XXXX 20.00 20.00 1 20.00			
50:Non-Matched Pharmacy Number	PATIENT, TRITWO/XXXX 09/10/10 OPPHARM, ONE eT TRICARE DRUG NOT BILLABLE Fill Per Provider OPPHARM, ONE SUB-TOTALS RX COUNT MEAN TRICARE NON-BILLABLE PRODUCT SUBTOTALS RX COUNT MEAN	1075xxxxx\$	0/930XXXX 20.00 20.00 1 20.00			
	PATIENT, TRITWO/XXXX 09/10/10 OPPHARM, ONE eT TRICARE DRUG NOT BILLABLE Fill Per Provider OPPHARM, ONE SUB-TOTALS RX COUNT MEAN TRICARE NON-BILLABLE PRODUCT SUBTOTALS RX COUNT MEAN	1075XXXXX\$	0/930XXXX 20.00 20.00 1 20.00 20.00 1 20.00	180	06XXX-3XXX-XX *********** C RT ACT/	DOCUSATE NA 100MG CA
	PATIENT, TRITWO/XXXX 09/10/10 OPPHARM, ONE	1075XXXXX\$ RICARE REJECT OV 107XXXX0B\$	0/930XXXX 20.00 20.00 1 20.00 20.00 1 20.00 VERRIDE ************************************	180 ************************************	06XXX-3XXX-XX *********** C RT ACT/	DOCUSATE NA 100MG CA

OPHARM, ONE		00.00			
SUB-TOTALS		20.00			
RX COUNT		1			
MEAN		20.00			
mpt class by them					
TRICARE REJECT SUBTOTALS		20.00			
RX COUNT		1			
MEAN		20.00			
MEAN		20.00			
IVISION: DIVISION ONE					
UBTOTALS		8 <mark>5.00</mark>			
X COUNT		3			
EAN		28.33			
DIVISION: DIVISION TWO					
******** TF	RICARE INPATIENT	********	****	* * * *	
PPATIENT, TRISIX/XXXX	107XXXXXX\$	0/930XXXX	09/10/10	C RT ACT	/NR
09/10/10 POSTMASTER	TOTANANA	10.00	180	06XXX-XXXX-XX	METFORMIN HCL 500MG TAB
PATIENT IS CURRENTLY ON A WEEK	דום חוגה מים חובש			00000-0000-00	METFORMIN HOL JOUNG TAB
PATIENT IS CORRENTLY ON A WEER	KEND PASS AND WI	LLL RETURN ON MONDAY	09/13/2010.		
PPATIENT, TRISEVEN/XXXX	107XXXXXB\$	0/93xxxxx	09/10/10	C RT ACT	<mark>/NR</mark>
09/10/10 POSTMASTER		40.00	180	06XXX-XXXX-XX	METFORMIN HCL 500MG TAB
PATIENT IS CURRENTLY ON A WEEK	KEND PASS AND WI	ILL RETURN ON MONDAY	09/13/2010.		
TRICARE INPATIENT					
TRICARE INPATIENT SUB-TOTALS		50.00			
		50.00 2			
SUB-TOTALS					
SUB-TOTALS RX COUNT MEAN		2 50.00			
SUB-TOTALS RX COUNT MEAN	RICARE NON-BILL#	2	******	****	
SUB-TOTALS RX COUNT MEAN ************************************	RICARE NON-BILLA	2 50.00 ABLE PRODUCT *****	09/10/10	C RT ACT	
SUB-TOTALS RX COUNT MEAN *********************** PPATIENT, TRIEIGHT/XXXX 09/10/10 OPPHARM, THREE		2 50.00 ABLE PRODUCT *****			/NR DOCUSATE NA 100MG CA
SUB-TOTALS RX COUNT MEAN ********************** PPATIENT,TRIEIGHT/XXXX 09/10/10 OPPHARM,THREE eT TRICARE DRUG NOT BILLABLE		2 50.00 ABLE PRODUCT *****	09/10/10	C RT ACT	
SUB-TOTALS RX COUNT MEAN ************************ PPATIENT, TRIEIGHT/XXXX 09/10/10 OPPHARM, THREE		2 50.00 ABLE PRODUCT *****	09/10/10	C RT ACT	
SUB-TOTALS RX COUNT MEAN ********************** ***********		2 50.00 ABLE PRODUCT *****	09/10/10	C RT ACT	
SUB-TOTALS RX COUNT MEAN *********************** **********		2 50.00 ABLE PRODUCT *****	09/10/10	C RT ACT	
SUB-TOTALS RX COUNT MEAN ********************** PPATIENT,TRIEIGHT/XXXX 09/10/10 OPPHARM,THREE eT TRICARE DRUG NOT BILLABLE Fill Per Provider OPHRAM,THREE		2 50.00 ABLE PRODUCT ***** 0/9300XXX 60.00	09/10/10	C RT ACT	
SUB-TOTALS RX COUNT MEAN ********************** PPATIENT, TRIEIGHT/XXXX 09/10/10 OPPHARM, THREE eT TRICARE DRUG NOT BILLABLE Fill Per Provider OPHRAM, THREE SUBTOTALS		2 50.00 ABLE PRODUCT ***** 0/9300XXX 60.00	09/10/10	C RT ACT	
SUB-TOTALS RX COUNT MEAN ********************** PPATIENT, TRIEIGHT/XXXX 09/10/10 OPPHARM, THREE eT TRICARE DRUG NOT BILLABLE Fill Per Provider OPHRAM, THREE SUBTOTALS RX COUNT MEAN	107XXXXXX\$	2 50.00 ABLE PRODUCT ***** 0/9300XXX 60.00	09/10/10	C RT ACT	
SUB-TOTALS RX COUNT MEAN ************************ **********	107XXXXXX\$	2 50.00 ABLE PRODUCT ***** 0/9300XXX 60.00 60.00	09/10/10	C RT ACT	
SUB-TOTALS RX COUNT MEAN ************************ PPATIENT, TRIEIGHT/XXXX 09/10/10 OPPHARM, THREE eT TRICARE DRUG NOT BILLABLE Fill Per Provider OPHRAM, THREE SUBTOTALS RX COUNT MEAN TRICARE NON-BILLABLE PRODUCT SUBTOTALS	107XXXXXX\$	2 50.00 ABLE PRODUCT ***** 0/9300XXX 60.00 60.00 1 60.00	09/10/10	C RT ACT	
SUB-TOTALS RX COUNT MEAN ************************ **********	107XXXXXX\$	2 50.00 ABLE PRODUCT ***** 0/9300XXX 60.00 60.00	09/10/10	C RT ACT	

*******	TRICARE REJECT C	VERRIDE ******	*****	<mark>* * * * *</mark>	
OPPATIENT, TRININE/XXXX	107xxxxxxx\$	0/930XXXX	09/10/10	C RT ACT/NR	
09/10/10 OPHARM,TWO		20.00	180	06XXX-XXXX-XX	METFORMIN HCL 500MG TAB
Claim ID: VA2005-056XXXX-X					
50:Non-Matched Pharmacy Nu	<mark>mber</mark>				
25:M/I Prescriber ID					
OPPHARM, TWO					
SUBTOTALS		20.00			
RX COUNT		1			
MEAN		20.00			
TRICARE REJECT					
SUBTOTALS		20.00			
RX COUNT		1			
MEAN		20.00			
PILAN		20.00			
DIVISION: DIVISION TWO					
UBTOTALS		130.00			
X COUNT		4			
IEAN		36.67			
GRAND TOTALS		215.00			
XX COUNT		7			
IEAN		30.71			
REPORT HAS FINISHED					
ress RETURN to continue:					

(This page included for two-sided copying.)

Tricare Reject Processing

The Third Party Payer Rejects - Worklist [PSO REJECTS WORKLIST] and Third Party Payer Rejects - View/Process [PSO REJECTS VIEW/PROCESS] options have been modified in the following manner:

- Display of non-DUR/RTS rejects
- Non-DUR/RTS Tricare rejections will be segregated at the end of the displayed information. They will be denoted with a "TRICARE Non-DUR/RTS" header. This header remains regardless of whether the GI Group by Insurance action is toggled on or off. The Tricare section sorts in the same manner as the main sort for non-Tricare prescriptions (by Rx, drug, patient).

```
Insurance Rejects-Worklist Aug 13, 2008@16:04:05 Page: 1 of 1
Division : ALBANY ISC
Selection : ALL UNRESOLVED REJECTS
 # KX# PATIENT(ID) [^]
1 101238 FCMPTPT
                                          DRUG
                                                                REASON
                PATIENT(ID) [^]
ECMEIBTEST, ONE (5566)
                                         MEDROXYPROGESTRONE 1 79 : REFILL TOO SO
    Payer Message:
  2 100739 ECMEPAT, TWO (8887) BENZTROPINE 2MG TAB 79 :REFILL TOO SO
    Payer Message:
  3 101960 OPTRICARE, ONE (4789) ACETAZOLAMIDE 250MG 79 : REFILL TOO SO
    Payer Message:
                             TRICARE - Non-DUR/RTS
               OPTRICARE, ONE (4789) DANTROLENE 25MG CAP 14:M/I Eligibili
    Payer Message:
          Select the entry # to view or ?? for more actions
DR Sort by Drug RE Sort by Reason RX Sort by Prescription PA Sort by Patient RF Screen Refresh GI Group by Insurance
Select: Quit//
```

Tricare DUR/RTS rejects displays with all other DUR/RTS rejects. See the boxed text in the
example below. Sequence 4 and 6 are rejects for the same prescription. Also note that in the
following example GI - Group by Insurance action is toggled OFF.

```
Insurance Rejects-Worklist Aug 13, 2008@16:10:22 Page: 1 of
Division : ALBANY ISC
Selection: ALL UNRESOLVED REJECTS

# Rx# PATIENT(ID) [^] DRUG REASON

1 101238 ECMEIBTEST, ONE (5566) MEDROXYPROGESTRONE 1 79 : REFILL TOO SO
    Payer Message:
                                         BENZTROPINE 2MG TAB 79 :REFILL TOO SO
  2 100739 ECMEPAT, TWO (8887)
    Payer Message:
   101960
                 OPTRICARE, ONE (4789)
                                            ACETAZOLAMIDE 250MG 79 :REFILL TOO SO
    Payer Message:
  4 101981
                 OPTRICARE, ONE (4789)
                                            ATENOLOL 100MG TAB 79 : REFILL TOO SO
    Paver Message:
                               TRICARE - Non-DUR/RTS
                 OPTRICARE, ONE (4789) DANTROLENE 25MG CAP 14 :M/I Eligibili
  5 101980
    Payer Message:
  6 101981 OPTRICARE,ONE(4789) ATENOLOL 100MG TAB 14 :M/I Eligibili
    Payer Message:
          Select the entry # to view or ?? for more actions
DR Sort by Drug RE Sort by Reason RX Sort by Prescription PA Sort by Patient RF Screen Refresh GI Group by Insurance
Select: Quit//
```

When GI - Group by Insurance action is toggled ON, the header "TRICARE" displays, and this "TRICARE" section sorts alphabetically within RTS/DUR insurances. This Tricare section is separate from the Non-DUR/RTS section that displays at the end of the listing.

Example with GI action toggled on:

```
Insurance Rejects-Worklist Aug 13, 2008@16:12:46 Page: 1 of 1
Division : ALBANY ISC
Selection : ALL UNRESOLVED REJECTS GROUPED BY INSURANCE
 # Rx# PATIENT(ID) [^]
                                       DRUG
                                                           REASON
                BLUE CROSS BLUE SHIELD
 1 100739 ECMEPAT, TWO (8887) BENZTROPINE 2MG TAB 79 :REFILL TOO SO
   Payer Message:
                                TRICARE
 2 101960 OPTRICARE,ONE (4789) ACETAZOLAMIDE 250MG 79 :REFILL TOO SO
   Payer Message:
                            ZENITH ADMINISTATORS
 ZENITH ADMINISTATORS
2 101238 ECMEIBTEST, ONE (5566) MEDROXYPROGESTRONE 1 79 : REFILL TOO SO
   Payer Message:
 4 101981 OPTRICARE, ONE (4789) ATENOLOL 100MG TAB 79 : REFILL TOO SO
   Payer Message:
                          TRICARE - Non-DUR/RTS
             OPTRICARE, ONE (4789) DANTROLENE 25MG CAP 14 :M/I Eligibili
 5 101980
   Payer Message:
  6 101981 OPTRICARE, ONE (4789)
                                      ATENOLOL 100MG TAB 14 :M/I Eligibili
   Payer Message:
         Select the entry # to view or ?? for more actions
DR Sort by Drug RE Sort by Reason RX Sort by Prescription PA Sort by Patient RF Screen Refresh GI Group by Insurance
Select: Quit//
```

The new TRI - Show/Hide Tricare toggle action has been added to the hidden menu on the Insurance Rejects screen. When toggled to Show, Tricare Non-DUR/RTS rejects will automatically display at the end of the listing. Toggling the TRI action to Hide will remove them from the screen.

Example with Tricare rejects displayed:

```
Insurance Rejects-Worklist Aug 13, 2008@16:04:05 Page: 1 of 1
Division : ALBANY ISC
 Selection : ALL UNRESOLVED REJECTS
      # Rx# PATIENT(ID) [^]
1 101238 ECMEIBTEST, ONE (5566)
                                                                                                                                            DRUG
                                                                                                                                          MEDROXYPROGESTRONE 1 79 : REFILL TOO SO
             Payer Message:
       2 100739 ECMEPAT, TWO (8887) BENZTROPINE 2MG TAB 79 : REFILL TOO SO
              Payer Message:
       3 101960 OPTRICARE, ONE (4789) ACETAZOLAMIDE 250MG 79 :REFILL TOO SO
              Payer Message:
                                                                                                TRICARE - Non-DUR/RTS
       4 101980 OPTRICARE,ONE(4789) DANTROLENE 25MG CAP 14 :M/I Eligibili
              Payer Message:
                                  Select the entry # to view or ?? for more actions
 DR Sort by Drug RE Sort by Reason RX Sort by Prescription PA Sort by Patient RF Screen Refresh GI Group by Insurance
 Select: Quit// ??
 The following actions are also available:
TRI Show/Hide Tricare

+ Next Screen

- Previous Screen

- Previous Screen

- RD

- 
Enter RETURN to continue or '^' to exit:
```

Example of Tricare rejects removed from display:

```
Insurance Rejects-Worklist Aug 13, 2008@16:04:05 Page: 1 of 1
Division : ALBANY ISC
Selection : ALL UNRESOLVED REJECTS
# Rx# PATIENT(ID) [^] DRUG REASON

1 101238 ECMEIBTEST,ONE(5566) MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
Payer Message:
2 100739 ECMEPAT,TWO(8887) BENZTROPINE 2MG TAB 79 :REFILL TOO SO
Payer Message:
3 101960 OPTRICARE,ONE(4789) ACETAZOLAMIDE 250MG 79 :REFILL TOO SO
Payer Message:

Select the entry # to view or ?? for more actions

DR Sort by Drug RE Sort by Reason RX Sort by Prescription
PA Sort by Patient RF Screen Refresh GI Group by Insurance
Select: Quit/ ??

The following actions are also available:

TRI Show/Hide Tricare FS First Screen PT Print List
+ Next Screen LS Last Screen SL Search List
- Previous Screen GO Go to Page ADPL Auto Display(On/Off)

UP Up a Line RD Re Display Screen QU Quit

Enter RETURN to continue or '^' to exit:
```

• Processing of TRICARE Rejections - TRICARE Eligible Bypass/Override Functions

• A bypass function is provided to allow continued processing of prescriptions for TRICARE eligible inpatients who's Patient status = Inpatient at the time the prescription is issued.

In the following example a patient who has been admitted into a VA hospital (Patient status = Inpatient) is allowed to go on a weekend "pass" and issued outpatient medications such as OTC drugs or supplies for the weekend. The system displays the Non-Billable Reason "TRICARE INPATIENT/DISCHARGE" on the screen. The display of the new Non-Billable Reason is due to the patient having Patient status = Inpatient, the patient is a TRICARE patient with TRICARE Insurance and an outpatient medication, OTC or Supply was issued.

The following is a sample of the ECME Billing Events Log update. The Non-Billable Reason "TRICARE INPATIENT/DISCHARGE" is now displayed on the BILLING ECME EVENTS LOG. This status allows the system to record why a TRICARE prescription was allowed to be bypassed.

Example: ECME Billing Events Log entry: TRICARE INPATIENT/DISCHARGE

```
PAGE 1

BILLING ECME EVENTS ON 10/31/10 (DETAILED) for XXXXXXX DIVISION

SINGLE PATIENT - TRICARE,ONE

RX# FILL DATE PATIENT NAME DRUG

1 271XXXX 0 10/31/10 TRICARE,ONE ACETAMINOPHEN 160MG/5ML ELIXIR

FINISH 10/31/10 4:04p Status:non-ECME Billable TRICARE INPATIENT/DIS

ELIGIBILITY:

DRUG:ACETAMINOPHEN 160MG/5ML ELIXIR (OZ)

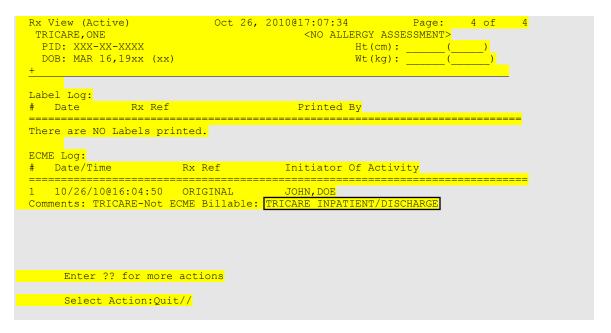
NDC:00054-3010-63, BILLED QTY:3, COST:.208, DEA:9

USER:JOHN,DOE

End of report, press RETURN to continue.
```

The following is a sample of the ECME View Prescription Log update. The Non-Billable Reason "TRICARE INPATIENT/DISCHARGE" is now displayed on the ECME View Prescription Log. The TRICARE INPATIENT/DISCHARGE status allows the system to record why a TRICARE Rx was allowed to be bypassed

Example: ECME View Prescription Log entry: TRICARE INPATIENT/DISCHARGE



TRICARE Eligible Outpatient Override Function

- An override function is provided to allow continued processing of prescriptions for TRICARE eligible outpatients when a rejected response is received from the TRICARE payer/PBM.
- The Reject Action prompt will default to "Quit". If the Q (Quit) action is selected, the rejected claim will go to the TRICARE section of the Pharmacy Third Party Payer Rejects Worklist. If the D (Discontinue) action is selected, the next prompt "Nature of Order" will default to "Service Reject". The I (Ignore) action is available if the user holds the "PSO TRICARE" security key and if selected, continued processing will occur.
- The Reject Action prompt will be updated to a default of "Quit".

Example of Reject Notification Screen Non-DUR/RTS with the default action of D(Discontinue)

```
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response
E REJECTED
    21 - M/I Product/Service ID
 *** TRICARE - REJECT RECEIVED FROM THIRD PARTY PAYER ***
 Division: XXXX DIVISION NPI#: XXXXXXXXX Patient: TRICARE, ONE (XXX-XX-XXXX) Sex: M DOB: OCT 1,19XX (Rx/Drug: XXX5341/0 - AMOXICILLIN 250MG CA ECME#: 2345678
                                                             DOB: OCT 1,19XX(XX)
 Reject(s): M/I Product/Service ID (21) Received on NOV 01, 2010@09:30:03.
 Insurance : EXPRESS SCRIPT Contact:
Group Name : TRICARE Group Number: DODA
   Select one of the following:
        I (I) GNORE - FILL RX WITHOUT CLAIM SUBMISSION
D (D) is continue - DO NOW FILL DEPOSITION
                    (D) iscontinue - DO NOT FILL PRESCRIPTION
           (D) ISCONTINUE - DO NOT TIBE TRADES INTERVENTION)
(I)gnore,(D)iscontinue,(Q)uit: Q//Discontinue
Nature of Order: SERVICE REJECT//
Requesting PROVIDER: VHAPROVIDER, ONE
                                                              PHYSICIAN
```

In the following example a prescription is rejected from the Third Party Payer with a reject code of (88) DUR REJECT. The pharmacist has the option to Discontinue, Ignore, Override or Quit. Ignore is the option displayed below and the PSO TRICARE security key is needed for continued processing.

Example of Reject Notification Screen DUR/RTS

```
*** TRICARE - REJECT RECEIVED FROM THIRD PARTY PAYER ***

Division: XXXXXX
Patient: OPPATIENT, TRICARE (765-XX-XXXX) Sex: F DOB: OCT 17,19XX(XX)
Rx/Drug: 2718XXX/0 - BALNETAR 7.5 OZ ECME#: 431XXXX
Reject(s): DUR REJECT (88). Received on NOV 01, 2010@07:08:44.

Insurance: EXPRESS SCRIPTS Contact:
Group Name: TRICARE Group Number: T100000

Select one of the following:

O (0) VERRIDE - RESUBMIT WITH OVERRIDE CODES
I (I) GNORE - FILL Rx WITHOUT CLAIM SUBMISSION
D (D) iscontinue - DO NOT FILL PRESCRIPTION
Q (Q) UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O) verride, (I) gnore, (D) iscontinue, (Q) uit: Q// i (I) GNORE - FILL Rx WITHOUT CLAIM
M SUBMISSION
You are bypassing claims processing. Do you wish to continue? NO// y YES
```

• For Non-Billable Tricare rejects, a Non-Billable Notification Screen is provided to allow continued processing of prescriptions. The Reject Action prompt will default to "Discontinue". If the action D (Discontinue) is selected, the prompt "Nature of Order" will default to "Service Reject". The I (Ignore) action is available if the user holds the "PSO TRICARE" security key and if selected, continued processing will occur. If the action Q (Quit) is selected, the Non-Billable TRICARE eligible prescription will go to the **Pharmacy Third Party Payer Rejects** – **Worklist** utilizing Reject Code "eT" with reject description "TRICARE-DRUG NON BILLABLE." (The reject code "eT" is for use internal to the VistA system only and has no relation to any NCPDP reject code listing.) The new entry will be displayed in the TRICARE section of the **Pharmacy Third Party Payer Rejects** – **Worklist.**

In the following example a TRICARE Active Duty patient with Outpatient status submits an OTC, Non-Billable drug or supplies prescription for dispensing. The pharmacist will have the option of Discontinuing the Rx, Ignoring the Rx or Quitting. Discontinue is the option displayed below.

Example of Non-Billable Notification Screen

```
Is this correct? YES//
DRUG NOT BILLABLE
                      *** TRICARE - NON-BILLABLE ***
                                                  NPI#: XXXXXXXXXX
  Division : XXXX DIVISION
  Patient : TRICARE, ONE (XXX-XX-XXXX) Sex: M
Rx/Drug : XXX5339/0 - DOCUSATE NA 100MG CA
                                                       DOB: JAN 1,19XX(XX)
   Date/Time: OCT 31, 2010@12:22:10
  Reason : Drug not billable
  This is a non-billable TRICARE prescription.
       Select one of the following:

D (D)iscontinue - DO NOT FILL PRESCRIPTION
                      (Q) UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)
                      (I) gnore - FILL Rx WITHOUT CLAIM SUBMISSION
(D)iscontinue,(Q)uit, (I)gnore: D// Discontinue
Nature of Order: SERVICE REJECT//
Requesting PROVIDER: VHAPROVIDER, ONE
                                                111
                                                         PHYSICIAN
```

In the following example a TRICARE Active Duty patient with Outpatient status submitted an OTC, Non-Billable drug or Supplies prescription for dispensing. The pharmacist selected the Quit option to send the prescription to the worklist for further review. The Non-Billable drug is displayed on the Pharmacy Third Party Payer Rejects – Worklist with a reason code "eT".

Example of Pharmacy Third Party Payer Rejects – Worklist

```
Insurance Rejects-Worklist
                             Oct 31, 2010@09:15:58
Division : ALBANY ISC
Selection : ALL UNRESOLVED REJECTS
  # Rx#
         PATIENT(ID) [^]
                                                                REASON
  Payer Message:
                             TRICARE - Non-DUR/RTS
                OPTRICARE, ONE (4789)
                                          DIAZOXIDE 300MG INJ
 13 102xxx
                                                                   TRICARE-DRUG
    Payer Message:
 14 102xxx OPTRICARE, ONE (4789)
                                          MANNITOL 15% S.S. LV 22 :M/I Dispense
    Payer Message:
 15 1028xxx OPTRICARE, ONE (4789)
                                          METHOCARBAMOL 750MG 34 :M/I Submissio
    Payer Message:
 16 103xxx OPTRICARE, ONE (4789)
                                          BENZTROPINE 2MG TAB 07 :M/I Cardholde
    Payer Message:
   103xxx
                                          DEXAMETHASONE 0.5MG 07 :M/I Cardholde
                OPTRICARE, ONE (4789)
    Payer Message:
 18 102xxx
               TRICARE, ONLYTRICAR (3939) NEODECADRON OPHTMALI 07: M/I Cardholde
    Payer Message:
 19 102xxx TRICARE, ONLYTRICAR (3939) GENTAMICIN OPHTHALMI 07 :M/I Cardholde
    Payer Message:
         Select the entry # to view or ?? for more actions
DR Sort by Drug RE Sort by Reason RX Sort by Prescription
PA Sort by Patient RF Screen Refresh GI Group by Insurance
                              Screen Refresh
PA Sort by Patient
                                                        Group by Insurance
Select: Next Screen//
```

- The Non-Billable TRICARE prescriptions will appear on the Reject Information screen shown in the example below once the TRICARE Non-Billable claim has been selected from the Pharmacy Third Party Payer Rejects Worklist. The screen will display:
 - ECME# field will be blank
 - Insurance Information will be blank
 - Reject code section will have the reject code eT and status will state "NO CLAIM SUBMITTED"
 - Available Actions will be DC Discontinue Rx, VW -View Rx, MP Medication Profile, FIL – Fill Rx and IGN Ignore Reject (FIL and IGN will require PSO TRICARE Security key)
 - Available Hidden Actions will be COM Add Comments ED Edit Rx and all other standard List Manager hidden actions
 - If the action DC is chosen, the system will discontinue the prescription and the prompt "Nature of Order" will default to "SERVICE REJECT"
 - The following actions, Resubmit Claim (RES), Change Suspense Date (CSD) and Submit Override Codes (OVR) actions are not available for processing a TRICARE eligible Non-Billable reject. If selected, an error message will appear: "RES not allowed for TRICARE Non-Billable claim", "CSD not allowed for TRICARE Non-Billable claim" or "OVR not allowed for TRICARE Non-Billable claim". The only actions available are to Discontinue, Fill the prescription, View prescription or Medication Profile"

Example of Non-Billable Product Reject Information Screen

```
Reject Information (TRICARE) Oct 30, 2010@10:15:01
Division : ECME DIVISION
                                                                  NPI#: XXXXXXXXXX
Patient : TRICARE, TWO (XXX-XX-XXXX)
Rx# : ###4928/0 ECME#:
                                     Sex: M
                                                                  DOB: JUL 1,19XX(XX)
                                                            Fill Date: Mar 16, 2009
CMOP Drug: ACARBOSE 25MG TAB
                                                             NDC Code: 00026-2863-52
REJECT Information (TRICARE)
           : OCT 17, 2010@13:19:22
Date/Time
           : TRICARE DRUG NOT BILLABLE (eT)
Reject(s)
              : NO CLAIM SUBMITTED
Status
          2010@13:25:07 - Transferred by OPECC. (OPCLERK, ONE)
- AUG 25,
INSURANCE Information
Insurance
Contact
Group Name
Group Number
Cardholder ID
          Enter ?? for more actions
   View Rx
                                                      CSD Change Suspense Date
                          FIL Fill Rx
                                                      IGN Ignore Reject
MP Medication Profile
                          DC Discontinue Rx
RES Resubmit Claim
                          OVR Submit Override Codes
Select Item(s): DC//
```

Example of Non-Billable Product Reject Information Screen displaying the action RES (Resubmit Claim) error message

```
Reject Information (TRICARE) Nov 11, 2010@12:37:30
                                                                 Page: 1 of 2
Division : ECME DIVISION
                                                                NPI#:
Patient : OPPATIENT, TRICARE (XXX-XX-XXXX)
                                                                DOB: OCT 7,19XX(XX)
Rx# : 27XXXXX/0
                            ECME#:
                                                           Fill Date: Sep 16, 2010
                                                           NDC Code: 00054-3035-63
         : ALUMINUM HYDROXIDE GEL 320MG/5ML SUSP
Drug
REJECT Information (TRICARE)
             : SEP 16, 2010@13:07:12
Date/Time
             : TRICARE-DRUG NON BILLABLE (eT)
Reject(s)
             : NO CLAIM SUBMITTED
Status
- SEP 16, 2010@13:07:12 - Transferred by (XXXXXXXX,XXXX)
INSURANCE Information
Insurance
Contact
Group Name
Group Number
         RES not allowed for TRICARE Non-Billable claim.
VW View Rx
                                                   CSD Change Suspense Date
                         FIL Fill Rx
MP Medication Profile
                         DC Discontinue Rx
                                                   IGN Ignore Reject
                         OVR Submit Override Codes
RES Resubmit Claim
Select Item(s): Next Screen//
```

Reject Information Screen – Electronic Signature and TRICARE Justification

This action requires the security key PSO TRICARE.

• A user must hold the "PSO TRICARE" security key for certain actions on the Third Party Payer Rejects – Worklist and the "Ignore" action on the TRICARE Reject Notification screen. If the user holds the security key "PSO TRICARE", the prompt will display: "You are bypassing claims processing. Do you wish to continue?" If the user enters (No=Default), the user will return to the reject notification screen. If the user selects Yes to continue, the system will mimic the current Ignore action/functionality. The user will be prompted to enter their electronic signature code and asked to enter data into the TRICARE Justification field which is required. The user will be allowed to "^" out of the process. If the user opts to "^" out of the process, they will be taken back to the Reject Information screen prompt.

In the following example a TRICARE patient with Outpatient status submits a prescription for processing and a rejected response is received from the TRICARE payer/PBM. The pharmacist initially sends the prescription to the Third Party Payer Rejects — Worklist then later decides to finish processing the prescription and chooses the FIL action.

Example of Reject Information Screen – Electronic Signature and TRICARE Justification

Reject Information (TRICARE) Sep 30, 2010@10:25:13	Page: 1 of 1
Division : ECME DIVISION	NPI#: XXXXXXXXX
Patient : TRICARE, TWO (XXX-XX-XXXX) Sex: M	
Patient: TRICARE, TWO (XXX-XXXXX) Sex: M Rx#: XXX4928/0 ECME#: 1231234	Fill Date: Feb 08, 2009
	NDC Code: 00026-2863-52
REJECT Information (TRICARE)	
Date/Time : JUL 10, 2010@12:22:10	
Reject(s) : M/I Cardholder ID (07)	
Status : OPEN/UNRESOLVED - E REJECTED	
COMMENTS	
- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK, C	ONE)
INSURANCE Information	
Insurance : EXPRESS SCRIPTS	
Contact:	
Group Name : TRICARE	
Group Number : DODA	
Cardholder ID : DODA	<u>.</u>
Enter ?? for more actions	<u> </u>
	<mark>ange Suspense Date</mark>
	<mark>lore Reject</mark>
RES Resubmit Claim OVR Submit Override Codes	
Select Item(s): Quit/VFIL	
	(12 (12) 0 12 (12)
You are bypassing claims processing. Do you wish to contin	nue (Y/N)? No/ <u>/Yes</u>
Enter your Current Signature Code: SIGNATURE VERIFIED	
TRICARE Justification: Patient required medication	

• If the user does not hold the security key "PSO TRICARE", an on screen alert to the user will display "Action Requires <PSO TRICARE> security key" as displayed in the below example. The user will need to press any key to return to the reject information screen.

Example of Reject Information Screen – Security Key – ALERT

```
Page: 1 of
Reject Information (TRICARE) May 15, 2010@11:45:23
Division : ECME DIVISION
                                                                NPI#: XXXXXXXXXX
                                                                 DOB: JAN 1,19XX(XX)
Patient : TRICARE, TWO (XXX-XX-XXXX) Sex: M
    : XXX4928/0
                          ECME#: 1231234
                                                           Fill Date: Mar 10, 2009
CMOP Drug: ACARBOSE 25MG TAB
                                                            NDC Code: 00026-2863-52
REJECT Information (TRICARE)
Date/Time : APR 29, 2010@09:25:03
Reject(s) : M/I Cardholder ID (07)
Status
             : OPEN/UNRESOLVED - E REJECTED
INSURANCE Information
Insurance : EXPRESS SCRIPTS
Contact
Group Name : TRICARE
Group Number : DODA
Cardholder ID : DODA
                       FIL Fill Rx
  View Rx
                                                   CSD Change Suspense Date
MP Medication Profile DC Discontinue Rx
                                                   IGN Ignore Reject
RES Resubmit Claim
                        OVR Submit Override Codes
Select Item(s): Quit//
```

The person that resolves TRICARE non-DUR/RTS rejects is dependent upon the type of reject. Dispense As Written (DAW) reject code 22 can be resolved by the pharmacy staff by editing the prescription and entering the appropriate DAW code that results in a claims resubmission. Other insurance related rejects (missing eligibility or cardholder ID number) are resolved by the Outpatient Pharmacy Electronic Claims Coordinator (OPECC). Once the rejection has been resolved, the Reject Information screen under the pharmacy reject worklist shows the status of the prescription as E PAYABLE. At this point the user may select the FIL action which will prompt for label print.

```
Reject Information (TRICARE) Aug 27, 2008@17:16:27
                                                             Page: 1 of
                                                    NPI#: 5000000021
Division : ALBANY ISC
Patient : OPTRICARE, ONE (666-55-4789) Sex: M
                                                            DOB: OCT 18,1963(44)
Rx# : 102059/0 ECME#: 0113288
                                                     Fill Date: Aug 27, 2008
                                                       NDC Code: 00779-0588-30
         : IMIPRAMINE 25MG TAB
Drua
REJECT Information (TRICARE)
Date/Time : AUG 27, 2008@17:15:08
Reject(s) : M/I Cardholder ID Number (07)
Status
            : OPEN/UNRESOLVED - E PAYABLE
INSURANCE Information
Insurance : TRICARE
Contact :
Group Name : TRICARE PRIME
Group Number : 123123
Contact
Cardholder ID : SI9844532
         Enter ?? for more actions
VW View Rx FIL Fill Rx
MP Medication Profile DC Discontinue Rx
                                                     OVR Submit Override Codes
                                                    CSD Change Suspense Date
Select Item(s): Quit// FIL Fill Rx
                   [Closing all rejections for prescription 102059:
                         07 - ...OK]
Print Label? ? YES//
```

• For rejects that remain in suspense, the user will be allowed to process the rejection as indicated above, however no labels will be printed until the prescription is pulled early or printed from suspense. Upon resolving the reject, the user will be notified of this information. CMOP prescriptions will function in the same manner.

Other Rejects

[PSO REJECTS WORKLIST]

Rejects under the OTHER REJECTS section of the screen are resolved in the same manner as DUR/RTS rejects. The comments section will denote whether the reject was transferred automatically as is the case in the example below or "Transferred by OPECC" would denote those rejects where the OPECC manually transferred them to pharmacy for resolution.

The following example shows the user selecting to resolve sequence 16 from the THIRD PARTY PAYER REJECT - WORLIST option shown above. The user selects ED to edit the DAW code for the prescription, then resubmits the claim afterward. Since the claim was payable, both the RTS reject in sequence 13 and the DAW reject in sequence 16 were marked resolved. Also both are removed from the worklist after submission. The user then proceeds to Patient Prescription Processing option to view the ECME logs which show that claim resubmission was payable and that both rejects have been resolved.

```
Reject Information (UNRESOLVED) Jul 30, 2008@14:54:51 Page: 1 of 2
Division: CHEYENNE VAM&ROC NPI#: 1164471991
Patient: OPPATIENT, FOUR (666-55-9987) Sex: M DOB: OCT 20,1965(42)
CMOP Drug: DANAZOL 50MG CAP
                                                  NDC Code: 00024-0303-06
REJECT Information
Reject Type : 22 - M/I Dispense As Written- received on JUL 30, 2008@14:32:16 Reject Status : OPEN/UNRESOLVED
Payer Message :
Reason
DUR Text
OTHER REJECTS
79 - Refill Too Soon
- JUL 30, 2008@14:32:16 - Automatically transferred due to override for reject
 code. (OPHARM, ONE)
        Enter ?? for more actions
VW View Rx
VW View Rx IGN Ignore Reject OVR Submit Override Codes MP Medication Profile RES Resubmit Claim CSD Change Suspense Date
Select: Next Screen// ed ED
                           Jul 30, 2008@14:54:53
-----example continues-----
```

```
ED Edit RF (Refill) RN (Renew)
                              Rx #: 2055203$e
   (1) *Orderable Item: DANAZOL CAP,ORAL
             CMOP Drug: DANAZOL 50MG CAP
   (2)
                      *Dosage: 50 (MG)
   (3)
                               Verb: TAKE
           Dispense Units: 1
                               Noun: CAPSULE
                             *Route: ORAL (BY MOUTH)
                       *Schedule: BID
   (4) Pat Instructions:
                                 SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
   (5) Patient Status: OUTPT NON-SC
              Issue Date: 07/11/08
                                                                                             (7) Fill Date: 07/11/08
Last Fill Date: 07/15/08 (Window)
ED Edit RF (Refill)
Select Action: Next Screen// NEXT SCREEN
                                                                                                    RN (Renew)
     Last Release Date:
                         Expires: 07/12/09
vs Supply: 3
                                                                                           (8) Lot #:
                                                                                                                  MFG:
               Days Supply: 3
                                                                                       (10) QTY (CAP): 6
 (9)
                                                                                          Remaining: 10
                # of Refills: 11
 (11)
               Provider: OPPROVIDER, ONE
 (12)
                      Routing: MAIL
                                                                                          (14) Copies: 1
 (13)
                            Clinic: Not on File
 (15)
                    Division: CHEYENNE VAM&ROC (442)
 (16)
                 Pharmacist:
 (17)
(18) Remarks: New Order (
(19) Counseling: NO
(20) Refill Data
(21) DAW Code: 0 - NO PROD
Finished By: OPHARM, ONE
+ Enter 22 for The Product of the Product
                     Remarks: New Order Created by copying Rx # 2055182.
                     DAW Code: 0 - NO PRODUCT SELECTION INDICATED
                  Enter ?? for more actions
DC (Discontinue) PR (Partial) RL (Release) ED Edit RF (Refill) RN (Renew)
Select Action: Next Screen// 21
DAW CODE: 0// ?
OP Medications (SUSPENDED) Jul 30, 2008@14:54:55
                                                                                                                          Page: 2 of 3
OPPATIENT, FOUR
    PID: 666-55-9987
                                                                                                         Ht(cm):
                                                                                                         Wt(kg): __
    DOB: OCT 20,1965 (42)
        Answer with BPS NCPDP DAW CODE
       Choose from:
             NO PRODUCT SELECTION INDICATED
                       SUBSTITUTION NOT ALLOWED BY PRESCRIBER
      1
                         SUBSTITUTION ALLOWED-PATIENT REQUESTED PRODUCT DISPENSED
                      SUBSTITUTION ALLOWED-PHARMACIST SELECTED PRODUCT DISPENSED
      3
                     SUBSTITUTION ALLOWED-GENERIC DRUG NOT IN STOCK
                     SUBSTITUTION ALLOWED-BRAND DRUG DISPENSED AS A GENERIC
      5
       6
                        OVERRIDE
                       SUBSTITUTION NOT ALLOWED-BRAND DRUG MANDATED BY LAW
       8
                       SUBSTITUTION ALLOWED-GENERIC DRUG NOT AVAILABLE IN MARKETPLACE
                        OTHER
DAW CODE: 0// 1 - SUBSTITUTION NOT ALLOWED BY PRESCRIBER
Are You Sure You Want to Update Rx 2055203? Yes// YES
```

-----example continues------

```
ED Edit
               RF (Refill) RN (Renew)
OP Medications (SUSPENDED) Jul 30, 2008@14:55:21
                                                       Page: 2 of 3
OPPATIENT, FOUR
                                               Ht(cm): _____
Wt(kg): ____
 PID: 666-55-9987
 DOB: OCT 20,1965 (42)
                                         (8) Lot #:
 Last Release Date:
           Expires: 07/12/09
       Days Supply: 3
                                        (10) QTY (CAP): 6
(9)
     # of Refills: 11
                                         Remaining: 10
(11)
       Provider: OPPROVIDER, ONE
(12)
        Routing: MAIL
Clinic: Not on File
(13)
                                         (14) Copies: 1
(15)
(16)
          Division: CHEYENNE VAM&ROC (442)
       Pharmacist:
(17)
(18)
          Remarks: New Order Created by copying Rx # 2055182.
       Counseling: NO
(19)
(20)
     Refill Data
(21)
         DAW Code: 1 - SUBSTITUTION NOT ALLOWED BY PRESCRIBER
      Finished By: OPHARM, ONE
        Enter ?? for more actions
DC (Discontinue) PR (Partial)
ED Edit RF (Refill)
                                      RL (Releas
RN (Renew)
Select Action: Next Screen// ^
MP Medication Profile RES Resubmit Claim CSD Change Suspense Date
                                                       Page: 1 of
Reject Information (UNRESOLVED) Jul 30, 2008@14:55:28
                                                      NPI#: 1164471991
Division : CHEYENNE VAM&ROC
Patient : OPPATIENT, FOUR (666-55-9987) Sex: M
                                                      DOB: OCT 20,1965(42)
Rx# : 2055203/1 ECME#: 1615102
                                                Fill Date: Jul 15, 2008
CMOP Drug: DANAZOL 50MG CAP
                                                  NDC Code: 00024-0303-06
REJECT Information
Reject Type : 22 - M/I Dispense As Written- received on JUL 30, 2008@14:32:16 Reject Status : OPEN/UNRESOLVED
Payer Message :
Reason
DUR Text
OTHER REJECTS
79 - Refill Too Soon
- JUL 30, 2008@14:32:16 - Automatically transferred due to override for reject
 code. (OPHARM, ONE)
        Enter ?? for more actions
VW View Rx IGN Ignore Reject OVR Submit Override Codes MP Medication Profile RES Resubmit Claim CSD Change Suspense Date
Select: Next Screen// RES Resubmit Claim
    When you confirm, a new claim will be submitted for
    the prescription and this REJECT will be marked
    resolved.
    Confirm? YES//
```

```
Prescription 2055203 successfully submitted to ECME for claim generation.
Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Transmitting
E PAYABLE
                                                          Please wait...
Insurance Rejects-Worklist Jul 30, 2008@14:38:38 Page: 2 of 3
Division : CHEYENNE VAM&ROC
Selection : ALL UNRESOLVED REJECTS
  # Rx# PATIENT(ID) [v]
                                             DRUG
                                                                      REASON
   Payer Message:
 13 2055202 OPPATIENT, FOUR (9987) BACLOFEN 10MG TAB 79 :REFILL TOO SO
   Payer Message:
 14 2055155 OPPATIENT, FOUR (9987)
                                             BENAZEPRIL HCL 40MG 79 : REFILL TOO SO
   Payer Message:
                                    OTHER REJECTS
15 2055134A OPPATIENT, FOUR (9987) CALCIUM GLUCONATE 65 22 :M/I Dispense
    Payer Message:
          Select the entry # to view or ?? for more actions
DR Sort by Drug RE Sort by Reason RX Sort by Prescription PA Sort by Patient RF Screen Refresh GI Group by Insurance
Select: Next Screen//^
Below is taken from Patient Prescription Processing option for the Rx in this example:
                           Jul 30, 2008@15:03:25
Medication Profile
                                                                   Page: 1 of 2
OPPATIENT, FOUR
                                                         Ht(cm): (_____(kg):
  PID: 666-55-9987
  DOB: OCT 20,1965 (42)
  SEX: MALE
                                                             ISSUE LAST REF DAY QTY ST DATE FILL REM SUP
 # RX # DRUG
 ----- (Third Party)-----REFILL TOO SOON/DUR REJECTS (Third Party)---------
 1 2055202$e BACLOFEN 10MG TAB 14 S> 07-08 12-12 11 3 2055155$e BENAZEPRIL HCL 40MG TAB 1 S> 06-24 06-26 10 1 3 2055134A$e CALCIUM GLUCONATE 650MG TAB 4 A> 06-16 07-30 10 2
          -----ACTIVE-----
 4 2055174$e ACEBUTOLOL HCL 200MG CAP 1 S> 06-26 06-27 11 1 5 2055123$e BACITRACIN 500 UNT/GM OPHTHALMIC OINT 1 AT 06-13 06-14 10 30 6 2055203$e DANAZOL 50MG CAP 6 S> 07-11 07-15 10 3 7 2055183$e FAMCICLOVIR 125MG TAB 2 AT 06-26 06-26 11 2 8 2055215$ GABAPENTIN 100MG CAP 6 S> 07-30 07-30 11 3 9 2055186$e HALOPERIDOL 0.5MG TAB 2 AT 06-26 06-26 11 4
         Enter ?? for more actions
DC Discontinue
ED Edit
                           PR Partial RL Release
RF (Refill) RN RenewSelect Action: Next
                           PR Partial
Screen// 6
 -----example continues-----
```

```
DC Discontinue PR Partial RL Release ED Edit RF (Refill) RN Renew
Select Action: Next Screen// AL AL
OP Medications (SUSPENDED) Jul 30, 2008@15:03:25
                                                    Page: 1 of 3
OPPATIENT, FOUR
                                             Ht (cm): _____ (____)
Wt (kg): ( )
 PID: 666-55-9987
 DOB: OCT 20,1965 (42)
             Rx #: 2055203$e
 (1) *Orderable Item: DANAZOL CAP,ORAL
 (2) CMOP Drug: DANAZOL 50MG CAP
         *Dosage: 50 (MG)
 (3)
             Verb: TAKE
     Dispense Units: 1
             Noun: CAPSULE
            *Route: ORAL (BY MOUTH)
         *Schedule: BID
 (4) Pat Instructions:
             SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
 (5) Patient Status: OUTPT NON-SC
     Issue Date: 07/11/08
                                       (7) Fill Date: 07/11/08
     Last Fill Date: 07/15/08 (Window)
     Enter ?? for more actions
DC Discontinue PR Partial RL Release ED Edit RF (Refill) RN Renew
Select Action: Next Screen// AL AL
Select Activity Log by number
1. Refill 2. Partial 3. Activity 4. Labels 5. Copay 6. ECME 7. CMOP Events 8. All Logs: (1-8): 8// 6
Rx #: 2055203 Original Fill Released:
Routing: Mail Finished by: OPPHARM, ONE
ECME Log:
# Date/Time Rx Ref Initiator Of Activity
______
1 7/11/08@10:13:11 ORIGINAL OPPHARM, ONE
Comments: ECME:PULLED FROM SUSPENSE(NDC:00024-0303-06)-E PAYABLE-pOPP INSURANCE
2 7/30/08@14:32:17 REFILL 1 OPPHARM, TWO
Comments: ECME: PULLED FROM SUSPENSE (NDC: 00024-0303-06) -E REJECTED-pOPP INSURANCE
3 7/30/08@14:55:56 REFILL 1 OPPHARM, TWO
Comments: ECME: REJECT WORKLIST-E PAYABLE-pOPP INSURANCE
ECME REJECT Log:
# Date/Time Rcvd Rx Ref Reject Type STATUS Date/Time Resolved
______
1 7/30/08@14:32:16 REFILL 1 M/I Dispense As RESOLVED 7/30/08@14:55:40
Comments: AUTOMATICALLY CLOSED (CLAIM RE-SUBMITTED)
2 7/30/08@14:32:16 REFILL 1 REFILL TOO SOON RESOLVED 7/30/08@14:55:40
Comments: AUTOMATICALLY CLOSED (CLAIM RE-SUBMITTED)
         Enter ?? for more actions
Select Action:Quit//
```

MailMan Message for Open/Unresolved Rejects

When prescriptions remain on the Third Party Payer Reject – Worklist over the specified number of days, the system will send a Mailman Message. This message will be sent to the PSO REJECTS BACKGROUND MESSAGE mail group. Those users needing access to this information will need to be added manually to this mail group.

The specified number of days referred to above is the number of days an uncommented reject can remain on the reject worklist without being included in the nightly reject worklist alert mail message. The number of days are defined in the EPHARMACY SITE PARAMETERS file (#52.86) as described in the EPHARMACY SITE PARAMETERS FILE section of this document.

The following are the criteria for generating a Mailman message regarding a rejected claim:

- Prescription is active
- Prescription is unreleased
- Claim is on the Reject Worklist for specified number of days or greater
- Claim has no comments added within date range.

Adding a comment to the reject will automatically reset the clock for the alert. The specified number of days will be site configurable and stored in EPHARMACY SITE PARAMETER file (#52.86). The initial patch default setting will be five (5) days; however, the site will be able to reset the parameter between one (1) and thirty (30) to generate the alert message. MailMan message will be sent as a Priority message, and there will be a separate MailMan message for each division. The following is an example of the message:

```
Subj: ePharmacy - OPEN/UNRESOLVED REJECTS LIST for ALBANY ISC [#2680833]
07/25/08@11:52 53 lines
From: OUTPATIENT PHARMACY PACKAGE In 'IN' basket. Page 1 *New*
The prescriptions listed below are third party electronically billable and can
not be filled until the rejection is resolved. No action to resolve the
rejection has taken place within the past 1 days.
Please use the THIRD PARTY PAYER REJECTS WORKLIST option to resolve the
rejection or add a comment to the rejection.
Unresolved rejects will not be sent to CMOP or the local print queue for
filling. They will continue to show on the rejects list until acted upon.
                                                                  REJECT
DATE
                                                          FILL
              PATIENT (ID) DRUG
 # RX/FILL
                                                          DATE
 1 100805/1
              IBSCDC, TWO (2828) SIMETHICONE 40MG TAB 6/5/08 6/5/08
    Reason: 79 : Refill Too Soon
              OPPATIENT, TH (7789) DIAZEPAM 10MG S.T. 6/9/08
 2 101149/0
                                                                     6/9/08
    Reason: 75 : Prior Authorization Required
   COMMENT: JUN 09, 2008@18:04:35 - Automatically transferred due to
            Override for reject code. (PHARM, ONE)
               IBPATIENT, QFO (567) ETHACRYNIC ACID 50MG S. 5/7/08
                                                                     6/23/08
    Reason: 31 :Submission Clarification Code
   COMMENT: JUN 23, 2008@15:02:11 - Transferred by OPECC. (OPECC, ONE)
Enter RETURN to continue or '^' to exit:
```

Alerts for Discontinued CMOP Prescription

Discontinued by a Background Process

When a CMOP prescription with a status of Transmitted or Retransmitted is discontinued by a background process to the Outpatient Pharmacy options, e.g. CPRS or Registration V. 5.3 packages, an email will be sent to the PSX EXTERNAL DISPENSE ALERTS mail group. If no recipients are defined in the new mail group, the message will be sent to PSXCMOPMGR key holders stating that a prescription was just discontinued and that the CMOP status for the discontinued prescription was either Transmitted or Retransmitted.

Discontinued by a Foreground Pharmacy Process

When a CMOP prescription with a status of Transmitted or Retransmitted is discontinued by a foreground Pharmacy process due to a duplicate drug scenario that would trigger the duplicate to be discontinued, then the Processing Status field of the duplicate drug message is highlighted to alert the user.

```
Duplicate Drug A AND Z OINTMENT in Prescription: 123456789

Status: Active

Processing Status: Transmitted to CMOP on 11/27/09

SIG: APPLY 1 TUBE TO AFFECTED AREA TWICE A DAY

QTY: 1 # of refills: 5

Provider: OPPROVIDER, PROV Refills remaining: 5

Last filled on: 11/27/09

Days Supply: 5

Discontinue RX # 123456789?
```

In the above example, the line "Processing Status: Transmitted to CMOP on 11/27/09" is bold.

List One Patient's Archived Rx's [PSO ARCHIVE LIST RX'S]

This option shows the basic patient demographics and the prescription numbers and dates of archiving for archived prescriptions for this patient.

Manual Print of Multi-Rx Forms [PSO LM MULTI-RX PRINT]

This option allows the user to reprint the Multi-Rx Refill Request form on laser label stock without having to reprint the entire prescription labels. The user will receive a system confirmation that this form has been queued to print.

Example: Manually Printing Multi-Rx Forms

```
Select Rx (Prescriptions) Option: MANual Print of Multi-Rx Forms

Enter patient to reprint Multi-Rx refill form for: OPPATIENT2,ONE

Select LABEL DEVICE: LEX2 LEX2$PRT Bay Pines

Multi-Rx form queued to print
```

Reprint an Outpatient Rx Label [PSO RXRPT]

The label reprint function allows a single label or many copies of the same label to be reproduced. When the patient is enrolled in ScripTalk®, a message is displayed to the user indicating this and prompting the user to use the ScripTalk® label for the prescription bottle.

Example: Reprinting an Outpatient Rx Label

```
Select Rx (Prescriptions) Option: REPRINT AN OUTPATIENT RX LABEL
Reprint Prescription Label: 400693
                                       ADHESIVE TAPE WATERPROOF 1IN ROLL
Patient is a ScripTalk patient. Use ScripTalk label for prescription bottle.
Number of Copies? : (1-99): 1// <Enter>
Print adhesive portion of label only? N// <Enter> 0
Do you want to send to External Interface Device? No// ?
Enter either 'Y' or 'N'.
Do you want to send to External Interface Device? No//
Comments:
Rx # 400693 06/27/03
OPPATIENT16,ONE
                                   #1
AS DIR ON AFFECTED AREA
ADHESIVE TAPE WATERPROOF 1IN ROLL
OPPROVIDER30, TWO OPPHARMACIST4, THREE
# of Refills: 2
```

When reprinting, you can choose whether or not you want to resend to a dispensing device using an external interface. If you do choose to resend, then the prescription will be sent to the dispensing system, and an entry will be made in the label log. This documents that this was a reprint and also resent to the dispensing system device. If you do not resend the prescription to the dispensing device, then only one entry is made in the label log.

Signature Log Reprint [PSO SIGLOG REPRINT]

This option allows the user to reprint the Signature Log for a prescription. The system will prompt for a prescription number and printer device. The user will receive a system confirmation that this log has been queued to print.

Example: Reprinting a Signature Log

```
Select Rx (Prescriptions) Option: Signature Log Reprint

Reprint Signature Log for Prescription: 100002277A PREDNISONE 20MG S.T.

Select LABEL DEVICE: LEX2 LEX2$PRT Bay Pines

Signature Log Reprint queued
```

View Prescriptions

[PSO VIEW]

View the most complete information available for a specific prescription. The activity log lists the date, reason, prescription reference (Rx Ref), the initiator of the activity, and comments. The label log lists the date, prescription (Rx Ref), the person who printed it, and comments. Prescriptions with a deleted status cannot be viewed.

(This page included for two-sided copying.)

Chapter 22: ScripTalk® 'Talking' Prescription Labels

ScripTalk® is a registered trademark of En-Vision America.

The ScripTalk® software generates prescription labels with speech synthesized patient information. This project helps to increase a patient's (individuals with visual impairments, dyslexia, and reading problems) ability to comply with their doctor's orders. Audible prescription information also reduces prescription errors thereby reducing hospital/emergency room visits.

Using the ScripTalk® Talking Prescriptions involves the installation of a specialty printer that prints to microchip-embedded label stock. The label will have printed text on it, along with the microchip containing the contents of the label. Pharmacy or other designated staff will enroll patients to receive these labels and issue those patients a special reader. When the patient holds a ScripTalk® label near the reader and presses a button, the content of the label is read aloud.



The pharmacy should check each ScripTalk® label for accuracy by using the ScripTalk® reader to read the label aloud. The printer encodes the chip while printing the label, but nothing in or attached to VistA can see or tell if the label is valid.

ScripTalk Main Menu

[PSO SCRIPTALK MAIN MENU]

The options on this menu are used for the implementation as well as the maintenance of the various files for the ScripTalk® 'talking' software. These options allow the set up and testing of the ScripTalk® equipment, enter new patients or edit existing patients as receivers of the 'talking' prescription labels, and run various reports.

PT ScripTalk Patient Enter/Edit
QBAR Queue ScripTalk Label by Barcode
QRX Queue ScripTalk Label by Rx#
RPT ScripTalk Reports...

Reprint a non-voided Outpatient Rx Label

PARM Set Up and Test ScripTalk Device...

ScripTalk Patient Enter/Edit [PSO SCRIPTALK PATIENT ENROLL]

This option allows the user to define a patient to receive ScripTalk® 'talking' prescription labels or to change a patient to not receive the labels.

Example: Enrolling a ScripTalk® Patient

```
Select ScripTalk Main Menu Option: PT ScripTalk Patient Enter/Edit

Select PATIENT: OP

1    OPPATIENT16, ONE 04-03-41    000246802    SC VETERAN
2    OPPATIENT17, ONE 08-30-48    000123456    NON-VETERAN (OTHER)

CHOOSE 1-2: 1   OPPATIENT16, ONE 04-03-41    000246802    SC VETERAN

SCRIPTALK PATIENT? N// YES

REMINDER: CMOP does not fill ScripTalk prescriptions. Please select mail status: 2 (DO NOT MAIL), 3 (LOCAL REGULAR MAIL) or 4 (LOCAL CERTFIED MAIL).

MAIL: 2    DO NOT MAIL

Select one of the following:

B         BLIND VETERAN
L    LOW VISION

INDICATION: // BLIND VETERAN
```



The "MAIL:" prompt above is only displayed when the patient is set to a Consolidated Mail Outpatient Pharmacy (CMOP) status or does not have a mail status defined.

A progress note can be automatically placed in the ScripTalk® patient's chart to be signed when that patient is enrolled. To invoke this feature, ask the Text Integration Utility/Computerized Patient Record System (TIU/CPRS) coordinator at the site to create a note entitled "SCRIPTALK ENROLLMENT". The note contents will be "Patient Name was enrolled in ScripTalk today, and is now eligible to receive prescriptions with encoded speech-capable labels."

Queue ScripTalk Label by Barcode [PSO SCRIPTALK MANUAL INTERNAL]

This option is used to queue a ScripTalk® label to print using the barcode number to identify the label.

Example: Queuing a ScripTalk® Label to Print by Barcode

```
Select ScripTalk Main Menu Option: QBAR Queue ScripTalk Label by Barcode Enter Barcode Rx#:
```

Queue ScripTalk Label by Rx# [PSO SCRIPTALK MANUAL EXTERNAL]

This option is used to queue a ScripTalk® label to print using the prescription number to identify the label.

Example: Queuing a ScripTalk® Label to Print by Rx#

```
Select ScripTalk Main Menu Option: QRX Queue ScripTalk Label by Rx#
Select PRESCRIPTION RX #: 400675B ADHESIVE TAPE WATERPROOF 1IN ROLL

Queuing ScripTalk label

Select PRESCRIPTION RX #: 12345

1 12345 NIACIN 250MG SR CAP
2 1234567A DIGOXIN 0.05MG CAP
CHOOSE 1-2: 2 1234567A DIGOXIN 0.05MG CAP
Patient not enrolled in ScripTalk program.

Select PRESCRIPTION RX #:
```

ScripTalk Reports [PSO SCRIPTALK REPORTS]

This menu option contains two reports containing ScripTalk® patient information.

- AUD ScripTalk Audit History Report
- WHO Report of ScripTalk Enrollees

ScripTalk Audit History Report [PSO SCRIPTALK AUDIT HISTORY]

The ScripTalk Audit History Report option prints a report that contains all ScripTalk® enrollment activity for a patient.

Example: ScripTalk Audit History Report

```
Select ScripTalk Reports Option: AUD ScripTalk Audit History Report Select PATIENT: OPPATIENT29, ONE 09-12-19 000876543 SC VETERAN

You may queue the report to print, if you wish.

DEVICE: HOME// <Enter> GENERIC INCOMING TELNET
```

SCRIPTALK AUDIT HISTORY		Date printe	ed: JUN 24,2003	Page: 1
Name: OPPATIENT29, ONE	Currently	enrolled: YES		
Date-Time Set	Previous Status	Previous Indication	Entered by	
Jun 16, 2003 08:10	YES YES NO YES	BLIND VETERAN LOW VISION	OPCLERK12, FOUR OPCLERK12, FOUR OPCLERK12, FOUR OPCLERK12, FOUR	
** End of Report ** Press Return to continue:				

Report of ScripTalk Enrollees [PSO SCRIPTALK ENROLLEES]

The *Report of ScripTalk Enrollees* option provides a report of patients who are defined to receive ScripTalk® 'talking' prescription labels for their outpatient medications. Patients who have a "no" answer to the ScripTalk® patient prompt can be excluded from the report.

Example: Report of ScripTalk Enrollees

```
Select ScripTalk Reports Option: WHO Report of ScripTalk Enrollees

Do you want to report only active enrollees? Y// <Enter> ES

You may queue the report to print, if you wish.

DEVICE: HOME// <Enter> GENERIC INCOMING TELNET
```

Report of ScripTalk Enr	ollment	Date printed: Jun 24, 2003 Page: 1
Patient name	SSN	Parallment last undeted
Indication		Enrollment last updated
OPPATIENT11, ONE BLIND VETERAN	000-46-8024	Jun 16, 2003@11:57:39
	000 76 5420	Jan 20, 2000022100100
OPPATIENT9, ONE LOW VISION	000-76-5432	Jun 15, 2003@18:17:30
OPPATIENT6, ONE LOW VISION	000-13-5790	Jun 18, 2003@03:52:18
OPPATIENT29, ONE LOW VISION	000-87-6543	Jun 16, 2003@08:49:34

Reprint a non-voided Outpatient Rx Label [PSO SCRIPTALK REPRINT VISTA LB]

This option allows the user to reprint an Outpatient Rx label for a ScripTalk® patient without voiding out the drug name.

When reprinting, you can choose whether or not you want to resend to a dispensing device, using an external interface. If you do choose to resend, then the prescription will be sent to the dispensing system, and an entry will be made in the label log. This documents that this was a reprint and also resent to the dispensing system device. If you do not resend the prescription to the dispensing device, then only one entry is made in the label log.

Example: Reprinting a non-voided Outpatient Rx Label

```
Select ScripTalk Main Menu Option: REprint a non-voided Outpatient Rx Label
Reprint Prescription Label: 400675B
                                         ADHESIVE TAPE WATERPROOF 1IN ROLL
Patient is a ScripTalk patient. Use ScripTalk label for prescription bottle.
Number of Copies? : (1-99): 1// <Enter>
Print adhesive portion of label only? N// <Enter> 0
Do you want to send to External Interface Device? No// ?
Enter either 'Y' or 'N'.
Do you want to send to External Interface Device? No//
                                                         NO
Comments:
Rx # 400675B 06/17/03
OPPATIENT29,ONE #1
  ON AFFECTED AREA AS DIR
ADHESIVE TAPE WATERPROOF 1IN ROLL
OPPROVIDER16, TWO
                             OPPHARMACIST24, THREE
# of Refills: 2
Select LABEL DEVICE: PRINTER #3
LABEL(S) QUEUED TO PRINT
```

Set Up and Test ScripTalk Device[PSO SCRIPTALK SET-UP]

This menu option contains the options necessary to define, set up and test the ScripTalk® device, print a sample ScripTalk® prescription label, and reinitialize the printer.

- ScripTalk Device Definition Enter/Edit
- Print Sample ScripTalk Label
- Test ScripTalk Device
- Reinitialize ScripTalk Printer

ScripTalk Device Definition Enter/Edit [PSO SCRIPTALK DEVICE DEF'N]

The *ScripTalk Device Definition Enter/Edit* option allows the user to define the ScripTalk® device for the division where it will be used and whether the labels should be automatically printed or will be queued for manual print. The printer must be installed and connected to the network server before using this option.

You may now tie a ScripTalk printer to a regular Pharmacy label printer(s) to control where the ScripTalk labels print for multi-divisions. A divisional ScripTalk device must be defined in order for the printer mapping functionality to work correctly. If there aren't any mapped printers, then the system defaults to the divisional printer.

Example: Defining the ScripTalk® Device

```
Select Set Up and Test ScripTalk Device Option: SCripTalk Device Definition
Enter/Edit
Define ScripTalk Printer by (D)ivision or (P)rinter mapping?: (D/P): Division
Division: TROY
                514
SCRIPTALK DEVICE: L8150$PRT// <Enter>
SCRIPTALK AUTO-PRINT SETTINGS: ?
     Enter 'A' if ScripTalk label printing should be automatic, "M" if label
     will be queued manually.
    Choose from:
      A AUTO PRINT
M MANUAL PRINT
SCRIPTALK AUTO-PRINT SETTINGS: A AUTO PRINT
Define ScripTalk Printer by (D) ivision or (P) rinter mapping?: (D/P): Printer
Select LABEL PRINTER TO BE MAPPED: LBL$PRT1 Birmingham
PQ$:LBL$PRT1.TXT
 SCRIPTALK DEVICE: L8150$PRT CIOFO Birmingham PQ$: L8150$PRT.TXT
Select LABEL PRINTER TO BE MAPPED: LBL$PRT2 Tuscaloosa
PO$:LBL$PRT2.TXT
                                                     PQ$: L8150$PRT.TXT
 SCRIPTALK DEVICE: L8150$PRT
                               CIOFO Birmingham
Select LABEL PRINTER TO BE MAPPED:
Define ScripTalk Printer by (D) ivision or (P) rinter mapping?: (D/P):
```

If the device is defined for auto-print, and some patients are defined as ScripTalk® patients, then whenever a VistA label is queued, if the prescription belongs to a ScripTalk® patient, a ScripTalk® label should print at the same time.

Print Sample ScripTalk Label [PSO SCRIPTALK SAMPLE LABEL]

After the printer is defined, a sample ScripTalk® label can be generated. The *Print Sample ScripTalk Label* option allows the user to print a test ScripTalk® label.

Example: Printing a sample ScripTalk® Label

```
Select Set Up and Test ScripTalk Device Option: PRint Sample ScripTalk Label
The following test data will be sent to the ScripTalk printer:
^F0250,700^XGE:RX.GRF^FS
^F0250,700^XGE:RX.GRF^FS
^AFR,20,10^F0531,50^FR^CIO^FD7305 N. MILITARY TRL Exp: January 01,2002^FS
^AFR,20,10^F0503,50^FR^CI0^FDRX#82382787 January 01,2006 Fill 01 OF 01^FS
^AFR, 20, 10 ^FO 475, 50 ^FR ^CIO ^FD ONE OPPATIENT 23 ^FS
^AFR,20,10^F0447,50^FR^CIO^FDTAKE 1 CAPSULE THREE TIMES DAILY^FS
^AFR, 20, 10 ^FO419, 50 ^FR ^CIO ^FD ^FS
^AFR, 20, 10 ^FO391, 50 ^FR ^CIO ^FD ^FS
^AFR,20,10^F0363,50^FR^CIO^FD^FS
^AFR,20,10^F0335,50^FR^CIO^FDDr. TWO OPPROVIDER30 MD^FS
^AFR,20,10^F0279,50^FR^CIO^FDQTY: 24 TABS^FS
^AFR,20,10^F0251,50^FR^CIO^FDAMOXICILLIN 500MG CAP^FS
^RX01,ONE OPPATIENT23^FS
^RX02,AMOXICILLIN 500MG CAP^FS
^RX03, TAKE 1 CAPSULE THREE TIMES DAILY ^FS
^RX04,010101^FS
^RX05,00^FS
^RX06,020000^FS
^RX07, TWO OPPROVIDER30^FS
^RX08,2928993888^FS
^RX09,82382787^FS
^RX10, ^FS
^PQ1,0,1,Y
^XZ
Task Queued !
Select Set Up and Test ScripTalk Device Option:
```

If the printer did not print the label, check to make sure that the printer is closed very tightly. It may not have been closed completely after loading the labels.

If the printer printed a blank label or one that is extremely faint, use the *Reinitialize ScripTalk printer* option to reinitialize the printer. Then try printing the sample label again.

Once the sample label has printed, it is ready to be read by the reader. To read the label, place it near the face of the reader and hit the round power button on the reader. A series of ticks will be heard as the reader finds and retrieves the information on the label. Then the reader will begin speaking.

Test ScripTalk Device [PSO SCRIPTALK TEST DEVICE]

The *Test ScripTalk Device* option can be used to send one Zebra Print Language (ZPL) test string to the ScripTalk® printer.

Example: Testing the ScripTalk® Device

```
Select Set Up and Test ScripTalk Device Option: TEst ScripTalk Device Enter ZPL test string: ^AFR,20,10^FO475,50^FR^CIO^FDONE OPPATIENT23^FS

Task Queued!
```

Reinitialize ScripTalk Printer [PSO SCRIPTALK REINITIALIZE]

The *Reinitialize ScripTalk Printer* option is used when the printer printed a blank label or one that is extremely faint. The user can reinitialize the printer and then try printing the label again.

Example: Reinitializing the Printer

```
Select Set Up and Test ScripTalk Device Option: ?

ScripTalk Device Definition Enter/Edit
Print Sample ScripTalk Label
Test ScripTalk Device
Reinitialize ScripTalk Printer

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.

Select Set Up and Test ScripTalk Device Option: REinitialize ScripTalk Printer

Task Queued !
```

Chapter 23: Using the Supervisor Functions Menu

This chapter describes the Supervisor Functions menu options.

Supervisor Functions

[PSO SUPERVISOR]

The options on this menu are used for the implementation as well as the maintenance of the various files for the basic running of the Outpatient Pharmacy software. The following options are available on the Supervisor Menu:

- Add New Providers
- Daily Rx Cost
- Delete a Prescription
- Edit Provider
- Initialize Rx Cost Statistics
- Inter-Divisional Processing
- Inventory
- Lookup Clerk by Code
- Monthly Rx Cost Compilation
- Patient Address Changes Report
- Pharmacist Enter/Edit
- Purge Drug Cost Data
- Recompile AMIS Data
- Site Parameter Enter/Edit
- View Provider

Add New Providers [PSO PROVIDER ADD]

This option allows new providers to be entered. If at the "Enter NEW PERSON's name" prompt the name entered is repeated and the display returns to the menu, the provider name entered is already in the file. The *Edit Provider* option must then be used to change existing provider entries.

Daily Rx Cost [PSO COSTDAY]

This option is used to compile pharmacy daily costs.

Delete a Prescription

[PSO RXDL]

Using this option, a prescription status can be changed to deleted. Deleted prescriptions do not appear on any profiles.



released prescription can only be deleted after it has been returned to stock.

Edit Provider[PSO PROVIDER EDIT]

Edit existing provider entries with this option in the NEW PERSON file.



If the inactive date given for the provider passes, the provider can no longer be used when entering a new prescription. However, the provider will still be available for refills beyond the inactivation date.

Initialize Rx Cost Statistics [PSO COSTINIT]

This option allows the manager to initialize the system to automatically compile cost data for one day or a range of days.



The default date is today plus 1 at 1:00 a.m. (T+1@1:00). The date on the screen represents either a default date/time if the option has never been queued, or the current date/time this option has already been queued to run.

Inter-Divisional Processing [PSO INTERDIV]

The user can permit or prevent processing between divisions with this option.

Inventory

[PSO INVENTORY]

Use to update the current inventory or set up a starting count of inventory for the pharmacy.



The ORDER UNIT file does not come with data. You must populate this file with your own data

Look-up Clerk by Code[PSO CLERK]

Identify the clerk by entering the identifying number. Clerk code-filing uses the internal identifying number of the clerk, which is determined at sign-on time and does not change.

Monthly Rx Cost Compilation [PSO COSTMONTH]

Use this option to gather information for reports of monthly pharmacy costs.

Patient Address Changes Report [PSO ADDRESS CHANGE REPORT]

This option provides a report that displays changes made to permanent and temporary mailing address information in the PATIENT file. Also, changes to the MAIL field and the MAIL STATUS EXPIRATION DATE field in the PHARMACY PATIENT file will be displayed. Changes can only be displayed if the edits were made using VA FileMan, and the Audit function was turned on for the field(s) at the time of the edit.

- For the PATIENT file, turn on auditing for:
 - STREET ADDRESS [LINE 1] field
 - ZIP+4 field
 - STREET ADDRESS [LINE 2] field
 - STREET ADDRESS [LINE 3] field
 - CITY field
 - STATE field
 - ZIP CODE field

- BAD ADDRESS INDICATOR field
- TEMPORARY ADDRESS ACTIVE? field
- TEMPORARY STREET [LINE 1] field
- TEMPORARY ZIP+4 field
- TEMPORARY STREET [LINE 2] field
- TEMPORARY STREET [LINE 3] field
- TEMPORARY CITY field
- TEMPORARY STATE field
- TEMPORARY ZIP CODE field
- TEMPORARY ADDRESS START DATE field
- TEMPORARY ADDRESS END DATE field
- For the PHARMACY PATIENT file, turn on auditing for:
 - o MAIL field
 - o MAIL STATUS EXPIRATION DATE field

Example: Patient Address Changes Report

```
Select Maintenance (Outpatient Pharmacy) Option: Patient Address Changes Report
This option provides a report that displays changes made to permanent and
temporary mailing address information in the PATIENT file (#2). Also changes
to the MAIL field (#.03) and the MAIL STATUS EXPIRATION DATE field (#.05)
in the PHARMACY PATIENT file (#55) will be displayed.
Changes can only be displayed if the edits were made using VA FileMan, and the
Audit function was turned on for the field(s) at the time of the edit.
Print report for a Single patient, or All patients: (S/A): Single// <Enter>
                                      12-2-16
Select PATIENT: OPPATIENT24, ONE
                                                    000345678 NSC VETERAN
This report will be sorted by Date/time of edit.
A beginning and ending date must now be entered for the search.
Beginning Date: T-100 (JUL 23, 2002)
Ending Date: T (OCT 31, 2002)
DEVICE: HOME// <Enter> GENERIC INCOMING TELNET <Enter>
Address changes for OPPATIENT24, ONE (34-5678)
                                                                      PAGE: 1
made between JUL 23, 2002 and OCT 31, 2002
______
Date/time of edit: OCT 31, 2002@11:10:18
     Field edited: STREET ADDRESS [LINE 1]
       Edited by: OPPHARMACY4, THREE
  Option/Protocol: PSO LM BACKDOOR ORDERS/PSO PATIENT RECORD UPDATE
       Old Value: <no previous value>
       New Value: TEST ADDRESS LINE 1
Date/time of edit: OCT 31, 2002@11:10:21
     Field edited: STREET ADDRESS [LINE 2]
       Edited by: OPPHARMACY4, THREE
  Option/Protocol: PSO LM BACKDOOR ORDERS/PSO PATIENT RECORD UPDATE
       Old Value: <no previous value>
       New Value: TEST ADDRESS LINE 2
Date/time of edit: OCT 31, 2002@11:10:25
    Field edited: STREET ADDRESS [LINE 3]
Press Return to continue, '^' to exit:
```

Pharmacist Enter/Edit [PSO RPH]

This option allows pharmacists to be identified to the system. Enter the name of the new pharmacist at the "Select Pharmacist" prompt. When the PSORPH key is shown as a default, press return. This enters the pharmacist into the file and gives him/her the PSORPH security key. To delete a pharmacist, enter the name, then enter an @ symbol at the "KEY" prompt and press return.

Purge Drug Cost Data[PSO PURGE DRUG COST]

To purge drug cost data from the DRUG COST file enter a starting and ending date. Then choose to run this job immediately or queue it.

Example: Purge Drug Cost Data

```
Select Maintenance (Outpatient Pharmacy) Option: PURGE Drug Cost Data

Purge Cost Data Starting: FEB 1997// <Enter> (FEB 1997)

Purge Cost Data Ending: 3/97 (MAR 1997)

Are you sure you want to purge cost data
from 02/00/97 to 03/00/97? NO// Y YES

Do you want this option to run IMMEDIATELY or QUEUED? Q// <Enter> UEUED
Requested Start Time: NOW// <Enter> (MAY 06, 1997@10:31:23)
Task #223079 QUEUED.
```

Recompile AMIS Data [PSO AMIS RECOMPILE]

Gather AMIS data from various sources with this option. It is recommended that this job should be queued to run during off-peak hours or at a time that is convenient for the site.

Note: Month/day/year may be specified for a current month report, but only month and year can be specified for reports of past months.

Site Parameter Enter/Edit [PSO SITE PARAMETERS]

This option is used to establish and edit parameters for the Outpatient Pharmacy software application. The following table lists each parameter and its corresponding description.

Site Parameter	Description
NAME	This field contains the name of the site.
MAILING FRANK	This field is used for the address of the outpatient site.
STREET ADDRESS	
AREA CODE	This field is used for the area code of the outpatient site.
PHONE NUMBER	This field is used for the telephone number of the outpatient site.
MAILING FRANK ZIP+4	This field is used for the zip code of the outpatient site. This field will allow zip+4
CODE	format (excluding the "-")
SITE NUMBER	This field is used to show the site/station number.
MAILING FRANK CITY	This field is used for the city in which the outpatient site is located.
MAILING FRANK	This field is used to show the state in which the outpatient site resides.
STATE	

The MAILING COMMENTS field is available for a site to enter any information that will show on the Mail Address label. For example, this free text entry might be "Forwarding service requested" or "Address service requested". The comments will show after the MAIL field in the Mail Address Section of the label.

Site Parameter	Description
MAILING COMMENTS	This field will be printed on the laser labels mailing address label. It can contain
	anything the site deems appropriate (i.e. whether mailing is "Forwarding service
	requested" or "Address service requested", etc.)
HOLD FUNCTION?	This site parameter is used to determine if the 'Hold' function will be used at the
	medical facility.
SUSPENSE FUNCTION?	This site parameter will be used to determine if the 'Suspense' feature will be used at
	the medical facility.
CANCEL DRUG IN	Prescriptions with duplicate classes can only be discontinued if this site parameter is
SAME CLASS	set to 'Yes' and if the Rx has not been put on hold through CPRS.
REFILL INACTIVE	This will be used to determine if inactive drugs will be used to refill active
DRUG RXS	prescriptions.
ASK METHOD OF	This field will be used to determine if method of pickup will be asked for window
PICKUP	prescriptions.
PASS MEDS ON	This field is used to determine if pass medication within specified date range will be
PROFILE	listed on profiles.
PROFILE `SORT BY'	This field will be used to determine the sort order of medications on profiles.
DEFAULT	
COPIES ON NEW	This field will be used to determine the number of copies for labels to print.
DRUG CHECK FOR	This field is used to determine if the duplicate drug warnings should be shown for
CLERK	non-pharmacist.
FEE BASIS SUPPORT	This field is used to determine if fee basis prescriptions are processed.
MULTI RX REQUEST	This field is used to determine if the multiple prescription request forms are printed
FORM	with medication labels.
BARCODES ON	This field is used to determine if barcodes are printed on profiles, labels, and multi
REQUEST FORMS	request forms.

Site Parameter	Description
BARCODES ON ACTION	This field is used to indicate if barcodes are to print with the action profiles. The
PROFILES	printer used must be setup or have barcode capabilities for the barcodes to print.
	Contact IRM to help determine which printers have barcode capabilities.
DISPLAY GROUP	This field is used to determine which bingo board display screen will be shown on
	the waiting room monitor.
SCREEN PROFILES	This field is used to determine if profiles are displayed when refilling and renewing
	medications.
EDIT PATIENT DATA	This field is used to determine if editing of patient data will be allowed.
EDIT DRUG	This field will be used to determine if drugs can be changed during prescription edit.
RENEWING RX'S	This field will be used to determine if renewing of medications will be allowed.
ALLOWED	<i>g</i>
PASS MEDS CANCEL	This field is used to determine if pass medications are to be cancelled.
AUTO SUSPEND	This field is used to determine if medication that is refilled or renewed before the
	next possible fill date is to be placed in suspense automatically.
SHALL COMPUTER	This field is used to determine if the computer will auto generate prescription
ASSIGN RX #S	numbers.
PROFILE WITH NEW	This field is used to determine if medication profiles are printed when new
PRESCRIPTIONS	medication is ordered.
SLAVED LABEL	This field will be used to allow printing of RX labels without being able to queue to
PRINTING	a printer.
	This parameter is primarily for slaved printing of RX labels. If 'yes' is the answer
	the prompt or action to be taken on the label will include the '/PRINT' action.
METHADONE	This field will be used to determine if the site has a methadone program and if a
PROGRAM	particular drug should be prompted for.
METHADONE DRUG	This field will be used to show what drug is being used if the site has a methadone
	program.
DAYS TO PULL FROM	This field will be used to pull a patient's medication from suspense for a specified
SUSPENSE	number of days. The day range is from 0 to 10.
DAYS TO PULL	This field will be used to pull a patient's controlled substances from suspense for
SUSPENDED CS CMOP	CMOP medications for a specified number of days. The range is between 0 and 10.
NEW LABEL STOCK	This field will be used to determine which medication label stock will be used.
EXTERNAL INTERFACE	This field allows sites to alter the characteristics of the external interface. The Set of
	Codes field have the following values:
	0 - the external interface is off 1 - send all drugs to the external interface; print labels
	locally
	2 - send all drugs to the external inter
	face; don't print labels locally
	3 - send only marked drugs to the external interface; don't print labels locally
DI ANIKI ARRI	4 - send only marked drugs to external interface and print labels through VistA.
BLANK LABEL	This field will determine if a blank label should print between patients on the label
BETWEEN PATIENTS	printers.
VERIFYING	This site parameter will determine if the name of the verifying pharmacist or the
PHARMACIST ON	name of the person who made the order request will print on the Rx label. If the
LABELS	parameter is set to Yes the verifying pharmacist name will print.

The CPRS ORDERING INSTITUTION field in the OUTPATIENT SITE file allows multiple Institutions to be entered for the local site. If more than one Institution is entered for a site, the user can select the appropriate Institution when using the *Complete Orders from OERR* option and complete Pending Orders from clinics that are associated with the specific Institution selected.

Site Parameter	Description
CPRS ORDERING	This field is used when completing orders from CPRS. If there is only one
INSTITUTION	Institution entry, then when completing orders from CPRS under this Outpatient
	site, only those orders from that Institution will be shown. If there is more than one
	entry, then the Institution will be prompted for when completing orders from CPRS,
	and only those orders associated with that Institution selected will be shown.
RELATED INSTITUTION	Institution associated with the site.
LOGICAL LINK	This is a pointer to the Logical Link file (#870). This link is used to transmit
	messages to an external (client) application. This field is not filled in when
	messages are exchanged between DHCP applications on the same system. This field
	will be used as the Logical Link for the prescription if there is a Clinic associated
	with the prescription, and the Institution derived from that Clinic has an entry in this
	CPRS ORDERING INSTITUTION multiple with an associated Logical Link.
NPI INSTITUTION	This is the institution or division that has the National Provider Identifier (NPI)
	value for this Outpatient Site. No two Outpatient Site entries in this file should point
	to the same INSTITUTION file entry. (Note that the RELATED INSTITUTION
	field differs from this field and is the parent institution which may be the same for
	any or all of the Outpatient Site entries.)
AUTOMATED	This field will determine what version of the automated dispense machine this site is
DISPENSE	running. If the machine is older than HL7 V.2.4, enter letter O, if HL7 V.2.4 has
	been installed, enter 2.4.
FILE RELEASE	This field is used to indicate if the release date/time is to be filed for the prescription
DATE/TIME	dispensed by an external interface.
ENABLE MASTER FILE	This field will determine if the automated dispense machines are ready to receive
UPDATE	HL7 V.2.4 messages.
SCRIPTALK DEVICE	This field contains a pointer to the ScripTalk printer device in the device file.
SCRIPTALK AUTO-	Set this to 'A' to have a ScripTalk label automatically print for ScripTalk-enrolled
PRINT SETTINGS	patients whenever their regular medication label prints. Set to 'M' if ScripTalk labels
	will be printed manually.
LABEL/PROFILE	Maximum number of label/profiles to be stored in the Label/Profile Monitor list for
MONITOR MAX 0	each printer device. The default and minimum value for this number is 1000. Each
	time the printer is used an entry is made in the Label/Profile monitor and if the
	monitor holds more entries than specified by this parameter, the oldest entry is
NADCOTICS	deleted.
NARCOTICS	This field is used to determine if narcotics will be numbered differently from other
NUMBERED	medications/supplies.
DIFFERENTLY NARCOTIC LOWER	This field is used to determine what prescription numbers percenties are to start with
NARCOTIC LOWER BOUND	This field is used to determine what prescription numbers narcotics are to start with if narcotics are numbered differently from other prescriptions/supplies.
NARCOTIC UPPER	
BOUND	This field is used to determine the highest prescription number used for narcotics if this type of medication is numbered differently from other medications/supplies.
LAST NARCOTIC	This field is used to indicate last number issue d for narcotic medications.
NUMBER ISSUED	This field is used to indicate last number issue a for harcotte inedications.
IB SERVICE/SECTION	Select the appropriate entry in the Service/Section file (#49) that is to be used for the
ID SERVICE/SECTION	Pharmacy Copayment/Integrated Billing procedures.
	Thatmacy Copayment/Integrated Dining procedures.

Site Parameter	Description
NARRATIVE FOR	This field contains information from the site regarding the copayment procedures for
COPAY DOCUMENT	the patient to follow upon receipt of the copay document. For example, information
	may include a telephone number to call regarding billing inquiries, a payment
	mailing address, etc.
NARRATIVE	This field contains information from the site regarding procedures for the patient to
REFILLABLE RX	obtain a refill of his refillable medication. May include the address, phone number,
	etc. that will assist the patient.
NARRATIVE NON-	This field contains information from the site regarding procedures for the patient to
REFILLABLE RX	obtain a new prescription for his non-refillable medication. This field may contain
	address, phone number, etc that will assist the patient.
CHARGE LOCATION	This field is a pointer to the Hospital Location File (#44). Multi-division sites
	should populate this field for each division. This data could be obtained from the
	Business Office of the Medical Center.

The CHARGE LOCATION field is used to group charges in the COTS billing system according to the type of service.

IMPORTANT

Entering and defining the Charge Locations is crucial to the success of this function. Initially, however, a unique Outpatient Pharmacy Location must be entered in the HOSPITAL LOCATION file by Registration or Scheduling. It is recommended that the Location be coordinated with the Medical Center's business office. A Charge Location should be defined for every division currently in the OUTPATIENT SITE file, which means that there could be multiple hospital locations or one location for all divisions.

If a Charge Location is not defined for a particular division, Outpatient Pharmacy will search all active divisions in the OUTPATIENT SITE file for a Charge Location entry and use the first one it finds. If the PFSS switch is ON and no Charge Locations are defined in any divisions, the information will not be passed on to IB or the COTS billing system and no charge takes place.

Information in the CHARGE LOCATION field cannot be deleted, but it can be replaced with entry of another Charge Location.

Site Parameter	Description
NCPDP NUMBER	This field is the site-specific National Council for Prescription Drug Programs
	number (NCPDP), formerly referred to as the National Association of Boards of
	Pharmacy Number (NABP).
PRESCRIPTION #	This field is used to enter the lowest prescription number for this site.
LOWER BOUND	
PRESCRIPTION # UPPER	This field is used to enter the highest prescription number for this site.
BOUND	
LAST PRESCRIPTION #	This field is used to store the last RX number used.
ISSUED	
INACTIVE DATE	This date will indicate that the Outpatient Site is no longer active, and cannot be
	selected through the Outpatient Pharmacy options.

Site Parameter	Description
LOGICAL LINK	This is a pointer to the Logical Link file (#870). This link is used to transmit
	messages to an external (client) application. This field is no t filled in when
	messages are exchanged between DHCP applications on the same system. This field
	will be used as the Logical Link for the prescription if there is no Clinic associated
	with the prescription, or if there is a Clinic associated with the prescription, but the
	Institution derived from that Clinic does not have an entry in the CPRS ORDERING
	INSTITUTION multiple with an associated Logical Link for that Outpatient Site
	entry.
DISPENSE DNS NAME	This is the DNS computer name of the automated dispensing machine that is used
	for this outpatient site division.
DISPENSE DNS PORT	Enter the DNS port number associated with the automated dispense machine for this
	outpatient pharmacy site division.
DISPENSING SYSTEM	This field identifies the name of the dispensing system printer device. When the
PRINTER	user selects this printer device and the external interface is in use, an HL7 message
	will be generated.

The following example displays all of the prompts that are possible with the Site Parameter Enter/Edit option. The prompts displayed at each site will depend upon that site's settings.

Example: Site Parameter Enter/Edit - all fields

```
Select Maintenance (Outpatient Pharmacy) Option: SITE Parameter Enter/Edit
Select SITE NAME: ALBANY
                            500
Would you like to see all site parameters for this division? Y// {
m NO}
NAME: ALBANY// <Enter>
MAILING FRANK STREET ADDRESS: 114 ANYSTREET AVE// <Enter>
AREA CODE: 555// <Enter>
PHONE NUMBER: 555-1234// <Enter>
MAILING FRANK ZIP+4 CODE: 55555// <Enter>
SITE NUMBER: 123// <Enter>
NCPDP NUMBER: <Enter>
MAILING FRANK CITY: ANY CITY// <Enter>
MAILING FRANK STATE: ANY STATE// <Enter>
MAILING COMMENTS: <Enter>
INACTIVE DATE: <Enter>
HOLD FUNCTION?: NO// <Enter>
SUSPENSE FUNCTION?: YES// <Enter>
CANCEL DRUG IN SAME CLASS: YES// <Enter>
REFILL INACTIVE DRUG RXS: YES// <Enter>
ASK METHOD OF PICKUP: YES// <Enter>
PASS MEDS ON PROFILE: YES// <Enter>
PROFILE `SORT BY' DEFAULT: DATE// <Enter>
COPIES ON NEW: YES// <Enter>
DRUG CHECK FOR CLERK: YES// <Enter>
FEE BASIS SUPPORT: YES// <Enter>
MULTI RX REQUEST FORM: YES// <Enter>
BARCODES ON REQUEST FORMS: BOTH// <Enter>
BARCODES ON ACTION PROFILES: YES// <Enter>
VERIFICATION: YES// <Enter>
DISPLAY GROUP: OUTPATIENT// <Enter>
SCREEN PROFILES: YES// <Enter>
EDIT PATIENT DATA: YES// <Enter>
EDIT DRUG: YES// <Enter>
RENEWING RX'S ALLOWED: YES// <Enter>
PASS MEDS CANCEL: NO// <Enter>
```

Example: Site Parameter Enter/Edit - all fields (continued)

```
AUTO SUSPEND: YES// <Enter>
SHALL COMPUTER ASSIGN RX #S: YES// <Enter>
PROFILE WITH NEW PRESCRIPTIONS: NO// <Enter>
SLAVED LABEL PRINTING: YES// <Enter>
METHADONE PROGRAM: NO// <Enter>
METHADONE DRUG: METHADONE SOLUTION (METHADOSE) // <Enter>
DAYS TO PULL FROM SUSPENSE: 2// <Enter>
DAYS TO PULL SUSPENDED CS CMOP: <Enter>
NEW LABEL STOCK: YES// <Enter>
EXTERNAL INTERFACE: SEND ALL ORDERS AND PRINT LABEL
        // <Enter>
Select DISPENSING SYSTEM PRINTER: <Enter>
BLANK LABEL BETWEEN PATIENTS: <Enter>
VERIFYING PHARMACIST ON LABELS: YES// <Enter>
AUTOMATED DISPENSE: HL7 V.2.4// <Enter>
FILE RELEASE DATE/TIME: YES// <Enter>
ENABLE MASTER FILE UPDATE: <Enter>
DISPENSE DNS NAME: <Enter>
DISPENSE DNS PORT: <Enter>
Select CPRS ORDERING INSTITUTION: TROY// <Enter>
 CPRS ORDERING INSTITUTION: TROY// <Enter>
 LOGICAL LINK: <Enter>
Select CPRS ORDERING INSTITUTION: <Enter>
RELATED INSTITUTION: ALBANY// <Enter>
NPI INSTITUTION: <Enter>
LABEL/PROFILE MONITOR MAX: 1000// <Enter>
NARCOTICS NUMBERED DIFFERENTLY: YES// <Enter>
NARCOTIC LOWER BOUND: 10000// <Enter>
NARCOTIC UPPER BOUND: 99999// <Enter>
PRESCRIPTION # LOWER BOUND: 100000999// <Enter>
PRESCRIPTION # UPPER BOUND: 500000000// <Enter>
IB SERVICE/SECTION: PHARMACY// <Enter>
NARRATIVE FOR COPAY DOCUMENT: <Enter>
The copay narrative displays here.
 Edit? NO//
NARRATIVE REFILLABLE RX:
                               _____******************
The narrative for refillable RXs displays here.
       *****************
 Edit? NO// <Enter>
NARRATIVE NON-REFILLABLE RX:. . .
The narrative for non-refillable RXs displays here.
-----
 Edit? NO// <Enter>
LOGICAL LINK: <Enter>
1.
```

View Provider [PSO PROVIDER INQUIRE]

Service/Section: PHARMACY

Select Provider:

This option provides a way to quickly look up basic data for a single provider.

Select Supervisor Functions Option: **VIEW** Provider Select Provider: OPPROVIDER, THREE OPPROVIDER, THREE TO PROVIDER Name: OPPROVIDER, THREE Initials: TO Tax ID: Date Exclusionary List Checked: NON-VA Prescriber: No Exclusionary Check Performed: On Exclusionary List: Exclusionary Checked By: Authorized to Write Orders: Yes Requires Cosigner: No DEA# VA# Class: Type: Unknown NPI# Remarks: Synonym(s): TO

(This page included for two-sided copying.)

Chapter 24: Using the Suspense Functions

This chapter describes the Suspense Functions menu options used for handling suspended prescriptions.

Suspense Functions

[PSOPND]

The *Suspense Functions* menu allows the user to print or delete various entries and print out statistics about entries in the RX SUSPENSE file. This file contains prescription labels that have been suspended for printing at a later time. Each prescription label has with it an associated suspense date which is the same as the fill or refill date.

There are eight *Suspense Functions* options that allow the user to manipulate the data in the RX SUSPENSE file:

- Auto-delete from Suspense
- Change Suspense Date
- Count of Suspended Rx's by Day
- Delete Printed Rx's from Suspense
- Log of Suspended Rx's by Day (this Division)
- Print from Suspense File
- Pull Early from Suspense
- Reprint Batches from Suspense

Auto-delete from Suspense [PSO PNDEL]

The *Auto-delete from Suspense* option is the same as the V. 6.0 option *Delete from Suspense File*. This option allows deletion of the records of all the prescriptions that have already been printed prior to the user specified number of days. This specified number of days must be set from 7 to 90 days at the "DAYS PRINTED RX STAYS IN 52.5" prompt in the *Site Parameter Enter/Edit* option. The task is set to run every 7 days at the user specified time. The user may also re-queue or de-queue this task using this option. Once a prescription is deleted from suspense, it cannot be reset for reprinting. This option will delete based on the date the prescription was printed from suspense, not the date that it was originally suspended for. The reason for this is that one batch may print on a certain day with prescriptions with different original suspense dates. This job will therefore never delete only part of a printed batch.

Example: Auto-delete from Suspense

Select Suspense Functions Option: Auto-delete from Suspense

COMMAND:

Edit Option Schedule
Option Name: PSO PNDEL1
Menu Text: Auto-delete from Suspense

TASK ID: 1091148

QUEUED TO RUN AT WHAT TIME: JUL 13,1997@01:00

DEVICE FOR QUEUED JOB OUTPUT:

QUEUED TO RUN ON VOLUME SET:

RESCHEDULING FREQUENCY: 8D

TASK PARAMETERS:

SPECIAL QUEUEING:

Press <PF1>H for help Insert

Change Suspense Date [PSO PNDCHG]

This option allows the suspense date for a specific prescription or all prescriptions for a patient to be changed. The new suspense date will become the fill/refill date automatically. The user is also given the opportunity to delete a specific prescription, or all prescriptions for a patient, from suspense while in this option. If a refill is deleted from suspense that has not yet been printed, the refill information will be deleted from the prescription, and the various fill dates will be adjusted accordingly. This option does not produce a label.

Count of Suspended Rx's by Day [PSO PNDCNT]

This option allows printing of a list showing the total number of prescriptions in the RX SUSPENSE file for every day in the specified time period.

This option can help the pharmacy anticipate the workload for particular days.

Delete Printed Rx's from Suspense[PSO PNDPRI]

With this option printed prescriptions can be deleted from suspense manually. Basically, it does the same thing as the *Auto-delete from Suspense* option, but it prompts the user to delete a single prescription, all prescriptions for one patient, all prescriptions for a given date range, or all prescriptions that have printed in a batch.

A batch is the group of labels that printed for a particular Print from Suspense File job. For example, if for one day, the *Print from Suspense File* option is queued 3 times, three batches will be printed for that day. (See the *Print from Suspense File* option.)

If it is necessary to reset and reprint the suspense labels and only selected labels are wanted, those not wanted can be deleted from the batch. The deleted labels will not be reprinted as part of the batch.

Log of Suspended Rx's by Day (this Division)[PSO PNDLOG]

Using this option, the manager can print a report by division of all suspended prescriptions sorted either by patient or identification number. The log contains the prescription number, patient name, drug name, type, and print status.

The *Log of Suspended Rx's by Day (this Division)* [PSO PNDLOG] option is updated to add a new column showing the B/D/F (Bad Address Indicator/ Do Not Mail/ Foreign Address) status of the prescription.

Print from Suspense File [PSO PNDLBL]

This option allows the user to print labels from the RX SUSPENSE file. First, enter the "Print Through" date. Any prescriptions with a suspense date on or before the date entered will print. Additionally, if a patient has at least one prescription on or before the date entered, any other prescriptions for that patient that are in suspense will be printed for the site parameter specified number of days to be pulled from suspense.

For example, if today's date is entered and Patient A has a prescription to be printed through the date entered, all of Patient A's prescriptions between the date entered plus the number of days set in the local site parameter will be printed. If there are no prescriptions for Patient A through the date entered, no labels will print.

Labels can be sorted by the patient name, the SSN, or the DEA Special Handling code. If sorted by DEA, the labels must then sort by patient name or SSN. Sorting by DEA will send the labels to the printer in three groups:

- **First group** will contain all the prescriptions with drugs that contain an "A" (narcotics and alcoholics) or a "C" (controlled substances-non narcotic) in the DEA Special Handling field.
- **Second group** will contain all the prescriptions with drugs containing an "S" (supply) in the DEA Special Handling field.
- **Third group** will contain all others. If a patient has prescriptions in suspense that fall in all three categories, that patient's labels will be printed three times, once in each group.

Only one job is tasked for all of the prescriptions in the batch; therefore, if the job is queued by mistake, only one tasked job must be undone. Any prescription that is put in suspense for the "Print Through Date" between the times the job was queued until the time it actually runs will be included in the job.

Labels for each job printed from suspense will be part of a batch. Each batch is identified by the Division, the user who queued the batch, and the date/time that the job was queued to begin.



Prescriptions pulled early from suspense will not be part of a batch, so they will not be able to be reprinted through the *Reprint Batches from Suspense* option.

A short profile for every patient for whom a label for a new prescription is being printed will also be printed if the local Profile with New Prescriptions site parameter is set to Yes.



If a patient has partial prescriptions with regular fills, only one set of trailing documents will print for that patient. (In V. 6.0 trailer documents were printed after each partial.)

If the patient has remote prescriptions, then the text "THIS PATIENT HAS PRESCRIPTIONS AT OTHER FACILITIES" will appear on the report as shown in the following example.

PRESCRIPTION PROFILE AS OF 12/30/2008	
NAME: PSOPATIENT, ONE	
THIS PATIENT HAS PRESCRIPTIONS AT OTHER FACILITIES	
PHARMACIST:	DATE:

If a prescription is determined to be an ePharmacy prescription (e.g., third party electronically billable), an electronic claim will be sent by ECME to the third party payer. The communication events between Outpatient Pharmacy and ECME are recorded in the ECME Log section of each prescription. The ECME log can be viewed in the patient Medication Profile screen (Activity Log option - AL) and also from the View Prescriptions option. If the claim submission returns a Refill Too Soon (79) or Drug Utilization Review (88) reject, the label is not printed for the prescription and it is moved to the Refill Too Soon/DUR section of the patient Medication Profile screen until the user resolves the reject. The prescription will also display on the Third Party Payer Reject worklist.

3/4 Days Supply Hold

Sites were seeing a great number of refill-too-soon third party claim rejections due to prescriptions being filled too early. To help prevent this for ePharmacy prescriptions, the system will now verify that ¾ of the days supply has elapsed on the previous fill before the prescription may be refilled. The following list describes the changes.

- ePharmacy prescriptions are delayed from being sent to CMOP and printed for local mail until ¾ of the days supply has elapsed.
- An activity log entry will state the date/time that the Rx will be allowed to be removed from suspense. The activity log will be defined on the initial evaluation. The following is an example of the log entry:

```
4 06/18/08 SUSPENSE REFILL 2 OPHARM, ONE Comments: 3/4 of Days Supply SUSPENSE HOLD until 6/20/08.
```

• The Pull Early from Suspense function is not impacted by this added functionality. Users may pull these type prescriptions early from suspense.

Host Errors

Prescriptions (ePharmacy only) will be prevented from being filled/sent to CMOP when a host processing error occurs as a claim is submitted through ECME. Host processing errors are identified by reject codes M6, M8, NN, and 99 which are returned by the third party payer. The following conditions apply when this scenario occurs.

- The transmission of the prescription fill will be delayed 1 day in hopes that the host processing issues will be resolved by the third party payer.
- An activity log entry will state the date/time along with a comment stating that the Rx/fill was left in suspense hold due to a host processing error. The following is an example of the log entry:

```
2 06/25/08 SUSPENSE ORIGINAL OPPHARM, TWO
Comments: SUSPENSE HOLD until 6/26/08 due to host reject error.
```

• The Pull Early from Suspense function is not impacted by this added functionality. Users may pull these type prescriptions early from suspense.

There is no user interaction for this function. It initiates when the Print from Suspense [PSO PNDLBL] option is initiated for CMOP prescriptions.

TRICARE

If a TRICARE claim is not ePharmacy billable or is not payable by the third-party payer, then the label will not be printed and the RX will not be filled.

Pull Early from Suspense [PSO PNDRX]

This option is used to pull a specific prescription or all prescriptions for a patient early. If a prescription is pulled early using this option, it will not be associated with any printed batch, and the user will not be able to reprint a label with the *Reprint Batches from Suspense* option. Since prescriptions that are pulled early from suspense do not belong to any printed batch and cannot be reprinted from suspense, there is no reason to leave them in suspense.

The user may also edit the "Method of Pickup". For the prompt "Pull Rx(s) and delete from Suspense", the user should answer **YES** to pull the prescriptions, and they will always be deleted from suspense.



If the routing is changed to "Window" when pulling from suspense early and the bingo board is being used, those prescriptions will be sent to the bingo board.

If a prescription is determined to be an ePharmacy prescription (e.g., third party electronically billable), an electronic claim will be sent by ECME to the third party payer. The communication events between Outpatient Pharmacy and ECME are recorded in the ECME Log section of each prescription. The ECME log can be viewed in the patient Medication Profile screen (Activity Log option - AL) and also from the *View Prescriptions* option. If the claim submission returns a Refill Too Soon (79) or Drug Utilization Review (88) reject, the label is not printed for the prescription and it is moved to the Refill Too Soon/DUR section of the patient Medication Profile screen until the user resolves the reject. The prescription will also display on the Third Party Payer Reject worklist.

Queue CMOP Prescription

[PSO RX QUEUE CMOP]

The *Queue CMOP Prescription* option allows the users (including pharmacy technicians) to put mail-routed prescription(s) for CMOP drugs on suspense for CMOP.

Example: Queue CMOP Prescription

```
Select Suspense Functions Option: QUEUE CMOP Prescription
Enter the Rx # to queue to CMOP: 300486
```

If the prescription does not have a routing of mail, has already been released, or is not for a CMOP drug, and does not pass all the other normal checks for CMOP it will not be put on suspense for CMOP.

Reprint Batches from Suspense[PSO PNDRPT]

This option enables the user to reset the RX SUSPENSE file so that labels in a batch that have already been printed once can be printed again. This option is useful if certain portions of the previously printed labels are unusable.

A prompt is shown for a date range, and within the date range entered all of the batches that have printed from suspense and all the labels associated with each batch are shown. Next, the user can choose to reprint any number of batches. Whichever batch or batches is chosen to reprint, only the labels printed with that batch will be reprinted in the same order they were printed originally. If a prescription or prescriptions have been deleted using the *Delete Printed Rx's from Suspense* option, it will be excluded from the batch to be reset and reprinted.



Prescriptions pulled early from suspense will not be part of a batch, so they will not be able to be reprinted through the Reprint Batches from Suspense option.

(This page included for two-sided copying.)

Chapter 25: Updating a Patient's Record

This chapter describes the option used for updating a patient's record.

Update Patient Record

[PSO PAT]

Use this option to update the patient information currently in the computer and to update patient records being viewed by using the *Patient Record Update* screen action. If implementing Other Language Modifications, use either to set a patient's other language preference.

In support of Registration patch DG*5.3*522, the Outpatient Pharmacy software provides for the automatic population of city, state, and county based on entry of a zip code.

Example: Updating a patient record

```
Select Outpatient Pharmacy Manager Option: UPDATE Patient Record
                  OPPATIENT, ONE
Select Patient:
                                   12-4-53 000007890 YES
                                                                 SC VETERAN
OPPATIENT, ONE
                                       ID#: 000-00-7890
4500 S MAIN ST
                                       DOB: DEC 4,1953
ADDRESS LINE2
LINE 3 OF ADDRESS
                                       PHONE: 555-555-1653
MADISON
WISCONSIN 53705
                                       ELIG: SC LESS THAN 50%
                                       SC%:
                                              10
WEIGHT (Kg):
                                        HEIGHT (cm):
DISABILITIES: ARTHRITIS-10% (SC), FOREARM CONDITION-5% (NSC),
             FOREARM CONDITION-4% (NSC), BENIGN EYE GROWTH-0% (NSC),
             LOSS OF FIELD OF VISION-20% (SC),
ALLERGIES:
ADVERSE REACTIONS:
```

If the PSO site parameter is set to allow editing of patient data, this prompt, "Do you want to update the Permanent address/phone? //N", is displayed. If the user enters "NO", then the software will not allow the user to update the permanent address and Bad Address Indicator fields.

```
Do you want to update the address/phone? N// \mathbf{Y} YES
Update (P)ermanent address, (T)emporary, or (B)oth: BOTH// <Enter>
STREET ADDRESS [LINE 1]: 4500 S MAIN ST// 4800 S MAIN ST
STREET ADDRESS [LINE 2]: ADDRESS LINE2// <Enter> ADDRESS LINE2
STREET ADDRESS [LINE 3]: LINE 3 OF ADDRESS// <Enter> LINE 3 OF ADDRESS
ZIP+4: 53705// <Enter> 53705
      Select one of the following:
                      MADISON*
CITY: MADISON// <Enter> *
STATE: WISCONSIN
COUNTY: DANE
PHONE NUMBER [RESIDENCE]: 555-555-1653// <Enter> 555-555-1653
PHONE NUMBER [WORK]:
    BAD ADDRESS INDICATOR: ? <Enter>
    Please enter 1 if the address is 'UNDELIVERABLE', 2 if the patient
    is 'HOMELESS', or 3 for 'OTHER' bad address reasons.
    Choose from:
              UNDELIVERABLE
              HOMELESS
             OTHER
Are you sure that you want to save the above changes? YES
Change saved.
```

Changes to the permanent address/Bad Address Indicator will not be saved until the prompt "Are you sure that you want to save the above changes?" is answered YES.

```
Press ENTER to continue: <Enter>
Temporary Address:
TEMPORARY ADDRESS ACTIVE?: NO// <Enter> NO
Press Return to continue: <Enter>
PHONE NUMBER [CELLULAR]: <Enter>
CNH CURRENT: <Enter>
FEE HOSPITAL I.D.: <Enter>
REMARKS: <Enter>
     >>PHARMACY PATIENT DATA<<
CAP: <Enter>
MAIL: <Enter>
MAIL STATUS EXPIRATION DATE: <Enter>
DIALYSIS PATIENT: <Enter>
NARRATIVE: <Enter>
Eligibility: COLLATERAL OF VET. <Enter>
Disabilities: <Enter>
PATIENT STATUS: SERVICE CONNECTED// <Enter>
COMMUNITY NURSING HOME: <Enter>
NURSING HOME CONTRACT: <Enter>
LAST DATE OF CONTRACT: <Enter>
RESPITE PATIENT START DATE: <Enter>
RESPITE PATIENT END DATE: <Enter>
OTHER LANGUAGE PREFERENCE: <Enter>
PMI LANGUAGE PREFERENCE: <Enter>
```

(This page included for two-sided copying.)

Chapter 26: Verifying Prescriptions

This chapter describes the option and methods used for verifying prescriptions.

Verification

[PSO VER]

Pharmacists use the *Verification* menu to verify prescriptions with a non-verified status; obtain a listing of those remaining non-verified prescriptions; or calculate the number of non-verified prescriptions by entering the patient or the clerk.

The following options are available on the *Verification* menu:

- List Non-Verified Scripts
- Non-Verified Counts
- Rx Verification by Clerk

If the verification site parameter is set to "YES", new prescriptions entered by a non-pharmacist (i.e., someone who does not hold the PSORPH key) will be put in a non-verified status, entered into the non-verified orders file, and will not be made active (nor will labels be printed) until they are reviewed and verified by a pharmacist. When new and renewed prescriptions for a patient are verified, all labels for that patient will be printed together. If a patient has refills only, these labels will be printed as they are entered.

A pharmacist may choose to verify all entries made by a particular technician rather than all the prescriptions for an individual patient.



Prescriptions in a non-verified status can not be canceled, edited, or deleted through the usual options. If a non-verified prescription is auto canceled on admission, it can be reinstated, but it returns to the non-verified status.

Verifying an ePharmacy order is similar to finishing an order. For an example, see "<u>Verifying ePharmacy Orders</u>" at the end of the "Verification through Patient Prescription Processing" section.

List Non-Verified Scripts [PSO VRPT]

This option allows the user to obtain a list of all scripts remaining in a status of 'Non-Verified' by either patient or entering clerk.

Example: Non-verified prescriptions (sorted by patient)

Select Outpatient Phar	macy Manager Option: Verification		
Select Verification Option: List Non-Verified Scripts Sort By Patient or Clerk: P// <enter> ATIENT DEVICE: HOME// [Select Print Device]</enter>			
	NON-VERIFIED PRESCRIPTIONS AS OF JUL 16,2007@14:49:54 SORTED BY PATIENT (# indicates Critical Drug Interaction)		
Patient name		Page: 1	
Rx # Issued	Drug	Entry By	
	ACETAMINOPHEN 1000MG TABLET	10000000028	
OPPATIENT, FOUR 100001591A 07/27/98	ASPIRIN BUFFERED 325MG TAB	11733	
OPPATIENT, ONE			
100001853 10/23/02	ERYTHRITYL TETRANIT. 10MG TAB	10000000022	
OPPATIENT, TWELVE			
	ACETAMINOPHEN 1000MG TABLET INSULIN NPH U-100 INJ (PORK)	10000000022	
Select Verification Op		100	

Non-Verified Counts

[PSO NVCNT]

This option allows the user to obtain a count of the number of prescriptions remaining in a status of non-verified.

Example: Total ofnNon-verified prescriptions

```
Select Verification Option: NON-Verified Counts
DEVICE: HOME// [Select Print Device]
                        NON-VERIFIED PRESCRIPTION COUNTS
                              JUL 16,2007@14:57:34
TOTAL NUMBER OF NON-VERIFIED PRESCRIPTIONS : 12
NUMBER OF PATIENTS WITH ONE OR MORE NON-VERIFIED PRESCRIPTIONS : 9
(NOTE: Total number of patients listed here may not always equal the number at
the bottom, since some patients at the bottom may be counted more than once,
possibly having non-verified Rx's entered on different days.)
                   # of
    Date Non-verified Rx's Different Patients
  07-27-98 1
05-18-99 2
06-22-00 2
                                            1
                                            1
TOTAL
Enter RETURN to continue or '^' to exit:
```

Rx Verification by Clerk [PSO VR]

This option verifies prescriptions in the non-verified status by entering the clerk.

Verification through Patient Prescription Processing

Prescriptions can be verified through the *Patient Prescription Processing* option. The following screen shows that the patient has already been chosen and the Patient Information screen is displayed. Sequence **92** in the Non-Verified section is being chosen to be verified.

```
Medication Profile Oct 26, 2004@15:54:11
                                                                                  Page:
                                                                                           9 of
OPPATIENT, ONE
                                                                                           <A>
  PID: 000-33-9521
                                                                      Ht (cm): 175.26 (08/10/2004)
  DOB: OCT 10, 1970 (34)
                                                                      Wt(kg): 75.45 (08/10/2004)
SEX: MALE
                                                                                 ISSUE LAST REF DAY
## 84 100476 PHENYTOIN 30MG CAP 180 DC 04-02 04-02 0 90 85 101064A$ POVIDONE IODINE SCRUB (OZ) 12 DC 07-09 08-03 0 15 86 101427 PREDNISONE 1MG TAB 180 DC 10-25 10-25 3 90 87 101152 PROBENECID 500MG TAB 180 DC 07-26 08-03 3 90 88 100307 QUININE SULFATE 200MG CAP 180 DC>02-22 02-22 3 90 89 100308 RIFAMPIN 300MG CAP 180 DC 02-22 02-22 3 90 90 100561 SYRINGE 5CC 90 DC 04-07 04-07 0 90
91 100626 VITAMIN A 25000 UNT CAP 180 DC>04-23 04-23 3 90
-----NON-VERIFIED------
92 101435 CALCITRIOL 0.25MCG CAP
                                                                       180 N> 10-26 10-26 3 90
             Enter ?? for more actions
PU Patient Record Update NO New Order PI Patient Information SO Select Order
                                                     SO Select Order
Select Action: Quit// 92
```

The prescription information displays, and **VF** for Verification is entered to begin the verification process.

```
OP Medications (NON-VERIFIED) Oct 26, 2004@18:01:44
                                                                   1 of
OPPATIENT, ONE
                                                                  < A >
                                                  Ht(cm): 175.26 (08/10/2004)
 PID: 000-33-9521
 DOB: OCT 10, 1970 (34)
                                                  Wt(kg): 75.45 (08/10/2004)
               Rx #: 101435
 (1) *Orderable Item: MAGNESIUM CITRATE LIQUID, ORAL
 (2)
     CMOP Drug: CALCITRIOL 0.25MCG CAP
            *Dosage: 0.25 (MCG)
 (3)
               Verb: TAKE
     Dispense Units: 1
             *Route: INTRAVENOUS SUBCUTANEOUS INTRATHECAL
          *Schedule: BID
 (4) Pat Instructions:
                SIG: TAKE ONE IV SC INTH TWICE A DAY
 (5) Patient Status: SC LESS THAN 50%
 (6) Issue Date: 10/26/04
                                           (7) Fill Date: 10/26/04
     Last Fill Date: 10/26/04 (Window)
      Enter ?? for more actions
    (Discontinue) PR (Partial) RL (Edit) RF (Refill) RN
                                                        (Release)
DC
                                                        (Renew)
Select Action: Next Screen// VF
```

The system displays the verification screen. The user can respond Y to edit, N not to edit or P to display a profile. In this example, Y is entered to edit the prescription.

```
RX: 101435 PATIENT: OPPATIENT, ONE (000-33-9521)
STATUS: Non-Verified
     DRUG: CALCITRIOL 0.25MCG CAP
      OTY: 180 90 DAY SUPPLY
      SIG: TAKE ONE IV SC INTH TWICE A DAY
   LATEST: 10/26/2004
                                 # OF REFILLS: 3 REMAINING: 3
   ISSUED: 10/26/04
                                     PROVIDER:
   LOGGED: 10/26/04
                                       CLINIC: NOT ON FILE
  EXPIRES: 10/27/05
                                      DIVISION: ALBANY ISC (500)
      CAP: NON-SAFETY
                                      ROUTING: WINDOW
  ENTRY BY: OPPROVIDER, ONE VERIFIED BY:
PATIENT STATUS : SC LESS THAN 50% COPIES : 1
EDIT: (Y/N/P): N// Y
```

The prescription displays in edit mode.

```
OP Medications (NON-VERIFIED) Oct 26, 2004@18:04:46
                                                                 1 of
OPPATIENT, ONE
                                                                  <A>
  PID: 000-33-9521
                                                  Ht(cm): 175.26 (08/10/2004)
 DOB: OCT 10, 1970 (34)
                                                  Wt(kg): 75.45 (08/10/2004)
               Rx #: 101435
 (1) *Orderable Item: MAGNESIUM CITRATE LIQUID, ORAL
     CMOP Drug: CALCITRIOL 0.25MCG CAP
 (3)
            *Dosage: 0.25 (MCG)
               Verb: TAKE
     Dispense Units: 1
               Noun:
             *Route: INTRAVENOUS SUBCUTANEOUS INTRATHECAL
          *Schedule: BID
 (4) Pat Instructions:
                SIG: TAKE ONE IV SC INTH TWICE A DAY
 (5) Patient Status: SC LESS THAN 50%
 (6)
        Issue Date: 10/26/04
                                           (7) Fill Date: 10/26/04
     Last Fill Date: 10/26/04 (Window)
     Enter ?? for more actions
                        PR (Partial) RL RF (Refill) RN
    Discontinue
Edit
DC
                                                       (Release)
ED
                                                       (Renew)
Select Action: Next Screen// 1
```

By selecting the orderable item or drug, the user can edit and/or enter the ICD-9 Diagnosis Codes that apply to the prescription. The following shows 1 for orderable item was selected for editing, and the orderable item was not changed. The ICD-9 codes are entered and accepted.

```
OP Medications (NON-VERIFIED) Oct 26, 2004@18:04:46
                                                                   1 of
                                                           Page:
OPPATIENT, ONE
                                                                  <A>
  PID: 000-33-9521
                                                  Ht(cm): 175.26 (08/10/2004)
  DOB: OCT 10, 1970 (34)
                                                  Wt(kg): 75.45 (08/10/2004)
Current Orderable Item: MAGNESIUM CITRATE LIQUID, ORAL
Select PHARMACY ORDERABLE ITEM NAME: MAGNESIUM CITRATE// MAGNESIUM CITRATE
LIQUID, ORAL
Previously entered ICD-9 diagnosis codes:
         Primary:
Select Primary ICD-9 Code: 121.1 121.1
                                          CLONORCHIASIS
         ...OK? Yes// <Enter> (Yes)
Select Secondary ICD-9 Code: 121.2 121.2
                                           PARAGONIMIASIS
        ...OK? Yes// <Enter> (Yes)
Select Secondary ICD-9 Code: 121.3 121.3
                                           FASCIOLIASIS
        ...OK? Yes// <Enter> (Yes)
Select Secondary ICD-9 Code: <Enter>
Are You Sure You Want to Update Rx 101435? Yes// <Enter> YES
```

Once the information is accepted, the prescription appears in Edit mode, and the verification process may begin again by entering VF.

```
OP Medications (NON-VERIFIED) Oct 26, 2004@18:06:05
                                                          Page:
                                                                  1 of
OPPATIENT, ONE
                                                                 <A>
  PID: 000-33-9521
                                                  Ht(cm): 175.26 (08/10/2004)
 DOB: OCT 10, 1970 (34)
                                                  Wt(kg): 75.45 (08/10/2004)
              Rx #: 101435
 (1) *Orderable Item: MAGNESIUM CITRATE LIQUID, ORAL
          CMOP Drug: CALCITRIOL 0.25MCG CAP
 (2)
 (3)
            *Dosage: 0.25 (MCG)
               Verb: TAKE
     Dispense Units: 1
             *Route: INTRAVENOUS SUBCUTANEOUS INTRATHECAL
          *Schedule: BID
 (4) Pat Instructions:
               SIG: TAKE ONE IV SC INTH TWICE A DAY
 (5) Patient Status: SC LESS THAN 50%
       Issue Date: 10/26/04
 (6)
                                           (7) Fill Date: 10/26/04
     Last Fill Date: 10/26/04 (Window)
        Enter ?? for more actions
DC
    Discontinue PR (Partial)
                                                RL
                                                       (Release)
                        RF
                             (Refill)
                                                RN
                                                       (Renew)
Select Action: Next Screen// VF
```

The Verification screen appears and "NO" is entered for the edit prompt. By entering "Yes" to the Verify prompt, verification is completed and the prescription is moved from the Non-Verified section to the Active section of the Medication Profile.

```
RX: 101435 PATIENT: OPPATIENT, ONE (000-00-0659)
STATUS: Non-Verified
     DRUG: CALCITRIOL 0.25MCG CAP
      QTY: 180 90 DAY SUPPLY
      SIG: TAKE ONE IV SC INTH TWICE A DAY
                                  # OF REFILLS: 3 REMAINING: 3
   LATEST: 10/26/2004
   ISSUED: 10/26/04
                                       PROVIDER:
   LOGGED: 10/26/04
                                       CLINIC: NOT ON FILE
  EXPIRES: 10/27/05
CAP: NON-SAFETY
                                       DIVISION: ALBANY ISC (500)
                                       ROUTING: WINDOW
 ENTRY BY: OPPHARMACIST, ONE
                                       VERIFIED BY:
PATIENT STATUS : SC LESS THAN 50%
                                       COPIES : 1
EDIT: (Y/N/P): N// NO
VERIFY FOR TEST, BA ? (Y/N/Delete/Quit): Y// <Enter>
```

Verifying ePharmacy Orders

Verifying an ePharmacy order is similar to finishing an order. After the user reviews the ePharmacy order and chooses to accept the order, the billing data is sent to ECME, which sends a message back to Outpatient Pharmacy displaying the status of the claim. The ECME section of the Activity Log is also updated.

```
RX: 101435 PATIENT: OPPATIENT, FOUR (000-01-1322P)
STATUS: Non-Verified
     DRUG: ENTEX CAP
      QTY: 10 10 DAY SUPPLY
      SIG: TAKE 25MG BY BY MOUTH EVERY DAY FOR 10 DAYS WITH FOOD
   LATEST: 11/05/2005 # OF REFILLS: 0 REMAINING: 0
TSSHED: 11/05/2005 PROVIDER:
   ISSUED: 11/05/2005
                                         PROVIDER:
   LOGGED: 11/05/2005
                                         CLINIC: NOT ON FILE
  EXPIRES: 11/15/2005
CAP: NON-SAFETY
                                        DIVISION: ALBANY ISC (500)
                                        ROUTING: WINDOW
  ENTRY BY: OPPHARMACIST, ONE
                                        VERIFIED BY:
PATIENT STATUS : SC LESS THAN 50% COPIES : 1
EDIT: (Y/N/P): N// NO
VERIFY FOR OPPHARMACIST4, THREE ? (Y/N/Delete/Quit): Y// <Enter>
Prescription 100003840 successfully submitted to ECME for claim generation.
Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Gathering claim info
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE
Another New Order for OPPATIENT, FOUR? YES//
```

Glossary

The following table provides definitions for common acronyms and terms used in this manual.

Acronym/Term	Definition		
Action Profile	A list of all active and recently canceled or expired prescriptions for a patient sorted by classification. This profile also includes a signature line for each prescription to allow the physician to cancel or renew it.		
Activity Log	A log, by date, of changes made to or actions taken on a prescription. An entry is made in this log each time the prescription is edited, canceled, reinstated after being canceled, or renewed. An entry will be made into this log each time a label is reprinted. A CMOP activity log will contain information related to CMOP dispensing activities.		
Allergy/ADR Information	Includes non-verified and verified allergy and/or adverse reaction information as defined in the Adverse Reaction Tracking (ART) package. The allergy data is sorted by type (DRUG, OTHER, FOOD). If no data is found for a category, the heading for that category is not displayed.		
AMIS	Automated Management Information System		
Answer Sheet	An entry in the DUE ANSWER SHEET file. It contains the questions and answers of a DUE questionnaire. This term is also used to refer to the hard copy representation of a DUE ANSWER SHEET entry.		
APSP	Originally Indian Health Service Pharmacy's name space now owned by the Outpatient Pharmacy software.		
Bypass	Take no action on a medication order.		
СМОР	Consolidated Mail Outpatient Pharmacy.		
CPRS	Computerized Patient Record System. CPRS is an entry point in VistA that allows the user to enter all necessary orders for a patient in different packages (e.g., Outpatient Pharmacy, Inpatient Pharmacy, etc.) from a single entry point.		
Critical	Interactions with severe consequences that require some type of action (finding facts, contacting prescribers) to prevent potential serious harm.		
DEA	Drug Enforcement Agency		
DEA Special Handling	The Drug Enforcement Agency special Handling code used for drugs to designate if they are over-the counter, narcotics, bulk compounds, supply items, etc.		
DHCP	See VistA.		
Dispense Drug	The Dispense Drug name has the strength attached to it (e.g., Acetaminophen 325 mg). The name alone without a strength attached is the Orderable Item name.		

Acronym/Term	Definition		
Dosage Ordered	After the user has selected the drug during order entry, the dosage ordered prompt is displayed.		
Drug/Drug Interaction	The pharmacological or clinical response to the administration of a drug combination different from that anticipated from the known effects of the two agents when given alone.		
DUE	Drug Usage Evaluation		
Expiration/Stop	The date on which a prescription is no longer active. Typically, this date is 30 days after the issue date for narcotics, 365 days after the issue date for other medications and 365 days after the issue date for supplies.		
Finish	Term used for completing orders from Order Entry/Results Reporting V. 3.0.		
GUI	Acronym for Graphical User Interface.		
Issue Date	The date on which the prescription was written. This date is usually, but not always, the same as the first fill date. This date cannot be later than the first fill date.		
HFS	Host File Server.		
Health Insurance Portability and Accountability Act of 1996 (HIPAA)	A Federal law that makes a number of changes that have the goal of allowing persons to qualify immediately for comparable health insurance coverage when they change their employment relationships. Title II, Subtitle F, of HIPAA gives HHS the authority to mandate the use of standards for the electronic exchange of health care data; to specify what medical and administrative code sets should be used within those standards; to require the use of national identification systems for health care patients, providers, payers (or plans), and employers (or sponsors); and to specify the types of measures required to protect the security and privacy of personally identifiable health care information. Also known as the Kennedy-Kassebaum Bill, the Kassebaum-Kennedy Bill, K2, or Public Law 104-191.		
ЈСАНО	Acronym for Joint Commission on Accreditation of Healthcare Organizations		
Label/Profile Monitor	A file for each printer which records, in the order in which they were printed, the last 1000 labels or profiles printed on that printer. This allows a rapid reprint of a series of labels or profiles that were damaged by a printer malfunction or other event.		
Local Possible Dosages	Free text dosages that are associated with drugs that do not meet all of the criteria for Possible Dosages.		
Medication Instruction File	The MEDICATION INSTRUCTION file is used by Unit Dose and Outpatient Pharmacy. It contains the medication instruction name, expansion and intended use.		

Acronym/Term	Definition		
Medication Order	A prescription.		
Medication Profile	A list of all active or recently canceled or expired prescriptions for a patient sorted either by date, drug, or classification. Unlike the action profile, this profile is for information only and does not provide a signature line for a physician to indicate action to be taken on the prescription.		
Medication Routes File	The MEDICATION ROUTES file contains medication route names. The user can enter an abbreviation for each route to be used at the local site. The abbreviation will most likely be the Latin abbreviation for the term.		
Med Route	The method in which the prescription is to be administered (e.g., oral, injection).		
NCCC	Acronym for National Clozapine Coordinating Center.		
Non-Formulary Drugs	The medications, which are defined as commercially available drug products not included in the VA National Formulary.		
Non-VA Meds	Term that encompasses any Over-the-Counter (OTC) medications, Herbal supplements, Veterans Health Administration (VHA) prescribed medications but purchased by the patient at an outside pharmacy, and medications prescribed by providers outside VHA. All Non-VA Meds must be documented in patients' medical records.		
Order	Request for medication.		
Orderable Item	An Orderable Item name has no strength attached to it (e.g., Acetaminophen). The name with a strength attached to it is the Dispense drug name (e.g., Acetaminophen 325mg).		
Partial Prescription	A prescription that has been filled for a quantity smaller than requested. A possible reason for a partial fill is that a patient is to return to the clinic in ten days but the prescription calls for a thirty-day supply. Partials do count as workload but do not count against the total number of refills for a prescription.		
Payer	In health care, an entity that assumes the risk of paying for medical treatments. This can be an uninsured patient, a self-insured employer, or a health care plan or Health Maintenance Organization (HMO).		
Pending Order	A pending order is one that has been entered by a provider through CPRS without Pharmacy finishing the order. Once Pharmacy has finished the order, it will become active.		
Pharmacy Narrative	OUTPATIENT NARRATIVE field that may be used by pharmacy staff to display information specific to the patient.		
Polypharmacy	The administration of many drugs together.		

Acronym/Term	Definition			
POE	Acronym for Pharmacy Ordering Enhancements (POE) project. Patch PSO*7*46 contains all the related changes for Outpatient Pharmacy.			
Possible Dosages	Dosages that have a numeric dosage and numeric dispense units per dose appropriate for administration. For a drug to have possible dosages, it must be a single ingredient product that is matched to the DRUG file. The DRUG file entry must have a numeric strength and the dosage form/unit combination must be such that a numeric strength combined with the unit can be an appropriate dosage selection.			
Prescription	This term is now referred to throughout the software as medication orders.			
Prescription Status	A prescription can have one of the following statuses.			
	Active - A prescription with this status can be filled or refilled. Canceled - This term is now referred to throughout the software as Discontinued. (See Discontinued.) Discontinued - This status is used when a prescription was made inactive either by a new prescription or by the request of a physician. Discontinued (Edit) - Discontinued (Edit) is the status used when a medication order has been edited and causes a new order to be created due to the editing of certain data elements. Deleted - This status is used when a prescription is deleted. Prescriptions are no longer physically deleted from the system, but marked as deleted. Once a prescription is marked deleted no access is allowed other than view. Expired - This status indicates the expiration date has passed. *Note: A prescription that was canceled or has expired more recently than the date specified by the cutoff date, typically 120 days in the past, can still be acted upon. Hold - A prescription that was placed on hold due to reasons determined by the pharmacist. Non-verified - There are two types of non-verified statuses. Depending on a site parameter, prescriptions entered by a technician do not become active until a pharmacist reviews them. Until such review, they remain non-verified and cannot be printed, canceled or edited except through the Verification menu. The second non-verified status is given to prescriptions when a drug/drug interaction is encountered during the new order entry or editing of a prescription. Pending - A prescription that has been entered through OERR. Refill - A second or subsequent filling authorized by the provider. Suspended - A prescription that will be filled at some future date.			
Progress Notes	A component of Text Integration Utilities (TIU) that can function as part of CPRS.			

Acronym/Term	Definition	
Provider	The person who authorized an order. Only users identified as providers who are authorized to write medication orders may be selected.	
Reprinted Label	Unlike a partial prescription, a reprint does not count as workload.	
Questionnaire	An entry in the DUE QUESTIONNAIRE file. This file entry contains the set of questions related to a DUE as well as the drugs being evaluated.	
Schedule	The frequency by which the doses are to be administered, such as Q8H, BID, NOW, etc.	
Sig	The instructions printed on the label.	
Significant	The potential for harm is either rare or generally known so that it is reasonable to expect that all prescribers have taken this information into account.	
Speed Actions	See Actions.	
Suspense	A prescription may not be able to be filled on the day it was requested. When the prescription is entered, a label is not printed. Rather, the prescription is put in the RX SUSPENSE file to be printed at a later date.	
Third (3 rd) Party Claims	Health care insurance claims submitted to an entity for reimbursement of health care bills.	
Time In	This is the time that the patient's name was entered in the computer.	
Time Out	This is the time that the patient's name was entered on the bingo board monitor.	
TIU	Text Integration Utilities; a package for document handling, that includes Consults, Discharge summary, and Progress Notes, and will later add other document types such as surgical pathology reports. TIU components can be accessed for individual patients through the CPRS, or for multiple patients through the TIU interface.	
Units per Dose	The number of Units (tablets, capsules, etc.) to be dispensed as a Dose for an order. Fractional numbers will be accepted for medications that can be split.	
VistA	Acronym for Veterans Health Information Systems and Technology Architecture, the new name for Decentralized Hospital Computer Program (DHCP).	
Wait Time	This is the amount of time it took to fill the prescription. It is the difference between Time In and Time Out. For orders with more than one prescription, the wait time is the same for each.	

This page intentionally left blank.

Index

3		

3/4 Days Supply Hold, 279

Α

About the Output Reports Menu, 87
Action Profile, 88
Add New Providers, 69, 261
Alerts for Discontinued CMOP Prescription, 247
All Reports, 111, 113
Alpha Drug List and Synonyms, 91
AMIS Report, 91
Archive to File, 16
Archiving menu, 15
Autocancel Rx's on Admission, 21, 70
Auto-delete from Suspense, 78, 275
Auto-Start Enter/Edit, 25, 73

В

Barcode Batch Prescription Entry, 178 Barcode Rx Menu, 178 Batch Print Questionnaires, 52 Bingo Board Manager, 23 Bingo Board Manager (BM), 70 Bingo Board User (BU), 30

C

CHAMPUS Billing Exemption, 43 Change Suspense Date, 276 Changing the Label Printer, 33 Check Quality of Barcode, 178 Clinic Costs, 94 Clozapine Pharmacy Manager, 35 CMOP Controlled Substance Rx Dispense Report, 93 Commonly Dispensed Drugs, 93 Complete Orders from OERR, 181 Controlling the Dispensing of Clozapine, 35 Copay Menu, 43 Cost Analysis Reports, 94 Cost of Prescriptions, 111, 113 Count of Prescriptions, 111, 113 Count of Suspended Rx's by Day, 276 Create/Edit a Questionnaire, 52

D

Daily AMIS Report, 95

Daily Management Report Menu, 111 Daily Rx Cost, 261 Date Range Recompile Data, 112 DAW Code, 157 DAW/NDC Edit, 160 Delete a Prescription, 80, 262 Delete Intervention, 78, 120 Delete Printed Rx's from Suspense, 277 Discontinue Prescription(s), 196 Discontinued by a Background Process, 247 Discontinued by a Foreground Pharmacy Process, 247 Dispense as Written, 157 Display Lab Tests and Results, 36 Display Patient's Name on Monitor, 30 Division Costs by Drug, 94 Drug Costs, 94 Drug Costs by Division, 94 Drug Costs by Division by Provider, 94 Drug Costs by Provider, 94 Drug List By Synonym, 96 DUE Report, 52 DUE Supervisor, 51 DUR reject, 198

Ε

Edit an Existing Answer Sheet, 51 Edit Data for a Patient in the Clozapine Program, 36, 76 Edit Pharmacy Intervention, 78, 119 Edit Prescription(s), 197 Edit Provider, 69, 262 Enter a New Answer Sheet, 51 Enter New Patient, 30 Enter Pharmacy Intervention, 119 Enter/Edit Clinic Sort Groups, 53, 76 Enter/Edit Display, 24, 71 Entering Actions, 9 ePharmacy Medication Profile Division Preferences, 204 ePharmacy Menu, 198 ePharmacy Site Parameters, 204 Evaluating Drug Usage, 51

Exempt Rx Patient Status from Copayment, 44 Expire Prescriptions, 80 External Interface Menu, 55

F

File Retrieval, 17 Find, 15 Flagging and Unflagging a New Pending Order, 175, 187, 245 Free Text Dosage Report, 97

Н

Handling Copay Charges, 41 High Cost Rx Report, 94 Host Errors, 279

I

Ignored Rejects Report, 198 Implementing and Maintaining Outpatient Pharmacy, 59 Inactive Drug List, 97 Initialize Daily Compile, 112 Initialize Rx Cost Statistics, 77, 262 Inter-Divisional Processing, 262 Internet Refill Report detailed by date, 101 detailed by patient, 98 detailed by result, 104, 105 summary by date, 103 summary by patient, 100 summary by result, 106 Intravenous Admixture, 111, 113 Introduction, 1 Inventory, 263

L

Label/Profile Monitor Reprint, 59
List Manager, 5
List Non-Verified Scripts, 288
List of Override Prescriptions, 37
List of Patients/Prescriptions for Recall Notice, 107
List One Patient's Archived Rx's, 19, 249
List Prescriptions on Hold, 109
Log of Suspended Rx's by Day (this Division), 277
Look-up Clerk by Code, 263

M

MailMan message for Open/Unresolved Rejects, 245

Maintenance (Outpatient Pharmacy), 59

Management Reports Menu, 110

Manual Auto Expire Rxs, 81

Manual Print of Multi-Rx Forms, 249

Medication Profile, 83, 114

Medication Reconciliation, 86

Messages for Clozapine Drug Selection, 37

Monthly Drug Cost, 114

Monthly Management Report Menu, 113

Monthly Rx Cost Compilation, 263

N

Narcotic Prescription List, 114 NDC Validation, 203 Non-Formulary List, 115 Non-VA Meds, 143 Non-VA Meds Usage Report, 10, 115 Non-Verified Counts, 289

0

One Day Recompile Data, 114 Other Outpatient Pharmacy ListMan Actions, 12 Other Rejects, 240 Other Screen Actions, 12 Outpatient Pharmacy Hidden Actions, 10

P

Patient Address Changes Report, 263 Patient Lookup, 14 Patient Prescription Processing, 132 Patient Status Costs, 95 Pharmacist Enter/Edit, 266 Pharmacy Cost Statistics Menu, 95 Pharmacy Intervention Menu, 119 Pharmacy Statistics, 95 Poly Pharmacy Report, 117 Prescription Cost Update, 81 Prescription List for Drug Warnings, 117 Print Archived Prescriptions, 20 Print Bingo Board Statistics, 25, 73 Print Bingo Board Wait Time, 27, 74 Print from Suspense File, 277 Print Pharmacy Intervention, 120 Print Sample ScripTalk Label, 259 Process Internet Refills, 178

Processing a Prescription, 131
Processing Drug/Drug Interactions, 121
Provider by Drug Costs, 95
Provider Costs, 95
Pull Early from Suspense, 280
Purge, 19
Purge Bingo Board Data, 28, 75
Purge Data, 114
Purge Drug Cost Data, 81, 266
Purge External Batches, 55, 82

Q

Queue Background Jobs, 69 Queue ScripTalk Label by Barcode, 254 Queue ScripTalk Label by Rx#, 255

R

Recompile AMIS Data, 82, 266 Refill Too Soon reject, 198 Register Clozapine Patient, 37 Reinitialize ScripTalk Printer, 260 Released and Unreleased Prescription Report, 117 Releasing Medication, 123 Remove Patient's Name from Monitor, 31 Report of ScripTalk Enrollees, 256 Reprint a non-voided Outpatient Rx Label, 257 Reprint an Outpatient Rx Label, 250 Reprint Batches from Suspense, 281 Reprint External Batches, 53, 55, 56 Request Statistics, 95 Reset Copay Status/Cancel Charges, 45 Returning Medication to Stock, 129 Rx (Prescriptions), 131 Rx Verification by Clerk, 289

S

Save to Tape, 15 ScripTalk Audit History Report, 255 ScripTalk Device Definition Enter/Edit, 258 ScripTalk Patient Enter/Edit, 254 ScripTalk Reports, 255 ScripTalk® Main Menu, 253 Set Up and Test ScripTalk Device, 258 SHAD, 41
Signature Log Reprint, 251
Site Parameter Enter/Edit, 61, 267
Sort Statistics By Division, 95
Speed Actions, 11
Start Bingo Board Display, 28, 75
Status of Patient's Order, 31
Stop Bingo Board Display, 29, 76
Supervisor Functions, 261
Suspense Functions, 275

T

Tape Retrieval, 16
Test ScripTalk Device, 260
Third Party Payer Rejects - View/Process, 207
Third Party Payer Rejects - Worklist, 211
TRICARE Bypass/Override Report, 219
TRICARE Eligible Outpatient Override
Function, 232
Tricare Reject Processing, 227
Type of Prescriptions Filled, 112, 114

U

Update Patient Record, 283
Using List Manager with Outpatient Pharmacy, 9
Using the Archive Menu Option, 15
Using the Bingo Board Menu, 23
Using the ScripTalk® Menu, 253
Using the Supervisor Menu, 261
Using the Suspense Functions, 275

V

Verification, 287
Verifying Prescriptions, 287
View External Batches, 57
View Intervention, 120
View Prescriptions, 251
View Provider, 273
Viewing and Resolving Open Rejects, 207

(This page included for two-sided copying.)